5/28/2002-91751-046-$150.00-$150.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

37477

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000041739

1. Entity Name: COMPUTECH CONSULTING, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
3000 RIO MAR ST.	SAME
Suite, Apt. #, etc.: #201	Suite, Apt. #, etc.: SAME
City & State: FT. LAUDERDALE, FL.	City & State: SAME
Zip: 33304 Country: BROWARD	Zip: SAME Country: SAME

4. FEI Number: 650752481 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Spiegel & Utrera, P.A. — SPIEGEL & UTRERA, P.A.

Street Address (P.O. Box Number is Not Acceptable): 1840 Coral Way, 4th Floor — 1840 CORAL WAY, 4TH FLOOR

City: Miami — MIAMI FL Zip Code: 33145 — 33145

8. The above-named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Spiegel & Utrera, P.A. By: [signature] Natalia Utrera, Vice President — July 26, 2002 DATE

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT/SECTRY/TREA.	TITLE	
NAME	MICHAEL G. REGISTER	NAME	
STREET ADDRESS	3000 RIO MAR ST. #201	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33304	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] MICHAEL G. REGISTER 4/30/02 9548950498

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #