

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000042910

1. Entity Name

ENGINEERING & COMPUTER SIMULATIONS, INC.

FILED

Apr 27, 2000 8:00 am  
Secretary of State

04-27-2000 90076 015 \*\*\*150.00

Principal Place of Business

Mailing Address

5757 BLUE LAGOON DR  
SUITE 110  
MIAMI FL 33126  
US

5757 BLUE LAGOON DR  
SUITE 110  
MIAMI FL 33126-2035  
US

2. Principal Place of Business

3. Mailing Address

3275 Progress Drive

3275 Progress Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite #2A

Suite #2A

City & State

City & State

Orlando, Florida

Orlando, Florida

Zip

Country

32826

Orange

Zip

Country

32826

Orange

4. FEI Number

65-0775610

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARMSTRONG, WAYMON  
5757 BLUE LAGOON DR  
SUITE 100  
MIAMI FL 33126

Name

Waymon Armstrong

Street Address (P.O. Box Number is Not Acceptable)

3275 Progress Drive,

Suite # 2A

City

Orlando

FL

Zip Code

32825

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME D  
STREET ADDRESS PARKER, M J  
CITY-ST-ZIP 5757 BLUE LAGOON DR, SUITE 110  
MIAMI FL 33126

TITLE ☒ Change ☐ Addition  
NAME Same  
STREET ADDRESS Same  
CITY-ST-ZIP 3275 Progress Drive, Suite 2A  
Orlando, Florida 32825

TITLE ☐ Delete  
NAME D  
STREET ADDRESS ARMSTRONG, WAYMON  
CITY-ST-ZIP 5757 BLUE LAGOON DR, SUITE 110  
MIAMI FL 33126

TITLE ☒ Change ☐ Addition  
NAME Same  
STREET ADDRESS Same  
CITY-ST-ZIP 3275 Progress Drive, Suite 2A  
Orlando, Florida 32826

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/00 (407) 83-9991