

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000108529

1. Entity Name  
MICROCOMP, INC.

**FILED**  
**Jul 11, 2000 8:00 am**  
**Secretary of State**

07-11-2000 90171 041 \*\*\*150.00

Principal Place of Business

7124 49TH ST. NORTH  
PINELLAS PARK FL 33781

Mailing Address

7124 49TH ST. NORTH  
PINELLAS PARK FL 33781

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3496369**

Applied For  
Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALTOUBAH, EYAD  
7124 49TH ST. NORTH  
PINELLAS PARK FL 33781

Name

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

City

**FL**

Zip Code

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 **D** ☐ Delete  
NAME **ALTOUBAH, EYAD**  
STREET ADDRESS **2978 DREW ST- #720**  
CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE **D** ☒ Change ☐ Addition  
NAME **ALTOUBAH, EYAD**  
STREET ADDRESS **6245 102nd Terrace**  
CITY-ST-ZIP **PINELLAS PARK, FL 33782**

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  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

**ALTOUBAH, EYAD**

**7/7/2000 727-5224400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment  
DH# P97000108559  
D0069009

***MicroComp, Inc.***

The fine art of providing quality computer products and services at the lowest prices  
7124 49<sup>th</sup> Street North  
Pinellas Park, FL 33781  
www.microcompsystems.com  
Tel (727) 522-440 \* Fax (727) 522-6613

Date: 7-7-2000

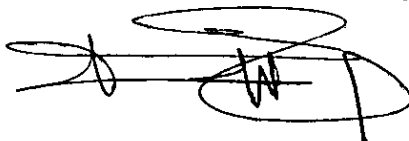
FLORIDA DEPARTMENT OF STATE  
~~DISVISION OF CORPORATIONS~~  
P.O.BOX 6327  
TALLAHASSEE, FL 32314

Our Ref: MC070720007  
Subject: 2000 UNIFORM BUSINESS REPORT

Dear Sir/Madam,

With reference to our telephone call earlier today,  
since we never received your first notice, and  
according to your instructions to us to mail a  
check for just \$ 150, please find enclosed check  
#1558 for that amount.

Sincerely,



Eyad Altoubah,  
Director,  
Microcomp, Inc.