

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 16, 2003 8:00 am**  
**Secretary of State**

06-16-2003 90145 022 \*\*\*150.00

**DOCUMENT # P98000008398**

1. Entity Name  
**BENY ELECTRONICS AND COMPUTER SYSTEMS, INC.**



Principal Place of Business  
**290 WEST 17TH STREET  
HIALEAH FL 33010**

Mailing Address  
**290 WEST 17TH STREET  
HIALEAH FL 33010**

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  
**65-0817497**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COLLADO, ELIO  
290 WEST 17TH STREET  
HIALEAH FL 33010**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

☐ Election Campaign Financing  
☐ Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
COLLADO, ELIO  
290 W. 17TH ST  
HIALEAH FL 33010** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

**REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/27/03**

**305 805 3444**

Date

Daytime Phone #

CR2034 (10/02)

Attachment  
80126119  
#098000008398

© HARLAND STYLE XXI

**BENY ELECTRONICS & COMPUTERS**  
SYSTEMS, INC  
290 WEST 17TH STREET  
HIALEAH, FL 33010


10094073

0954

PAY TO THE ORDER OF Florida Department of STATE \$ 150.00

DATE 4/22/03

DOLLARS

 **WACHOVIA**  
ACH RT 067006432

FOR 098000008398 FEI 65-912497 Ballack

⑈000951⑈ ⑈067006432⑈2090001908630⑈

MP

To Replace 10094073


**BENY ELECTRONICS & COMPUTERS**  
SYSTEMS, INC  
290 WEST 17TH STREET  
HIALEAH, FL 33010

0968

PAY TO THE ORDER OF Florida Department of STATE \$ 150.00

DATE 6/10/03

DOLLARS

 **WACHOVIA**  
ACH RT 067006432

FOR 098000008398 FEI 65-081747 Ballack

⑈000968⑈ ⑈067006432⑈2090001908630⑈

MP