

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90089 021 ***150.00

DOCUMENT # P98000043816

1. Entity Name

COLE SYSTEMS, INC.

Principal Place of Business

Mailing Address

7280 W PALMETTO PARK ROAD SUITE 304
 BOCA RATON FL 33433

B0087924

2. Principal Place of Business

3. Mailing Address

7280 W Palmetto Pk Rd

7280 W Palmetto Pk Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

304

304

City & State

City & State

Boca Raton FL

Boca Raton FL

4. FEI Number

65-0836751

Applied For

Not Applicable

Zip

Country USA

Zip

Country USA

33433

Palm Beach

33433

USA

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

GARELLEK, STEVEN

7000 WEST PALMETTO PARK ROAD SUITE 200

BOCA RATON FL 33433

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 \$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

TITLE President ST
 NAME Cheri Clayton
 STREET ADDRESS 7280 W Palmetto Park Road #304
 CITY - ST - ZIP Boca Raton FL 33433 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

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 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 CITY - ST - ZIP ☐ Change ☐ Addition

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:

Cheri Clayton Cheri Clayton 4/26/00

(561) 620-8652

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #