


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-23-2003 90060 037 \*\*\*150.00  
FILED P98000048472

CR2E034 (4/03)

**DOCUMENT # P98000048472**

1. Entity Name  
**CARDI CONSULTING ASSOCIATES INCORPORATED**



03 AUG -1 AM 10: 35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**1230 WILSHIRE CIRCLE WEST  
PEMBROKE PINES FL 33027**

Mailing Address  
**1230 WILSHIRE CIRCLE WEST  
PEMBROKE PINES FL 33027**



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State

Zip Country

Zip Country

4. FEI Number **65-0840503**

Applied For  
 Not Applicable

6. Name and Address of Current Registered Agent

**CARDILICCHIA, TINA  
1230 WILSHIRE CIRCLE WEST  
PEMBROKE PINES FL 33027**

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

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
After September 10, 2003 Fee will be \$750.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARDILIECHIA, TINA 1230 WILSHIAS CIRCLE WEST PEMBROKE PINE FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARDILIECHIA, TINA 1230 Wilshire Circle West Pembroke Pines, Fl. 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED \_\_\_\_\_ Date: 2/14/03 Daytime Phone #: 954 447-3139

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUG. 1. 2003 11:51AM

NO. 730 P. 2



**EZ Computer Training Center**  
7615 Davie Road Extension, Hollywood, FL 33024

"Where learning is Fun and Easy"



July 19, 2003

FEI Number: 65-0840503

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL. 32304

Dear Sir/Madam:

Please be advised that the Corporation, Cardi Consulting Associates Incorporated, did not receive any notification indicating the need to file the UBR report prior to June 2003.

I am, therefore, respectfully requesting that the late fee be waived. As you may be able to tell from previous years of filing, Cardi Consulting Associates Incorporated has been consistently timely with this requirement.

We are enclosing a check for the filing fee in the amount of \$150.00.

Your favorable consideration to this request is greatly appreciated.

Sincerely,

  
Tina Cardilicchia  
President

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Phone: (954) 447-3139

Fax: (954) 447-3730

tina@ezcomputertraining.com