

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053669

1. Entity Name

SYSTEMS GO INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

3825 HENDERSON BLVD. SUITE 500
TAMPA FL 33629

3825 HENDERSON BLVD. SUITE 500
TAMPA FL 33629

2. Principal Place of Business

3. Mailing Address

6011 Benjamin Rd
Suite 102

6011 Benjamin Rd
Suite 102

City & State

Tampa FL

City & State

Tampa FL

Zip

33634

Country

USA

Zip

33634

Country

4. FEI Number

59-3517762

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARSI, CLIFFORD S
3825 HENDERSON BLVD, SUITE 500
TAMPA FL 33629

7. Name and Address of New Registered Agent

Name Stephen Hayter

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

6011 Benjamin Rd
Suite 102

City Tampa

FL

Zip Code 33634

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

Stephen Hayter

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

(NOTE: Registered Agent signature required when reinstating)

JUNE 6, 2001

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, 2001 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 D
NAME BARSI, CLIFFORD S
STREET ADDRESS 3825 HENDERSON BLVD, SUITE 500
CITY-ST-ZIP TAMPA FL 33629

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO
NAME Stephen Hayter
STREET ADDRESS 6011 Benjamin Rd Suite 102
CITY-ST-ZIP Tampa FL 33634

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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:

Stephen Hayter HAYTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 6, 2001

DATE

Daytime Phone #

FILED
Jun 14, 2001 8:00 am
Secretary of State

06-14-2001 90008 025 ***550.00

AUG 14 2001



DO NOT WRITE IN THIS SPACE

59-3517762