

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103571

1. Entity Name
GSIS TECHNOLOGY, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90092 013 ***150.00

Principal Place of Business
4311 WEST WATERS STREET #401
TAMPA FL 33614

Mailing Address
4311 WEST WATERS STREET #401
TAMPA FL 33614

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 ~~95-4623588~~
95-4623588

Applied For
Not Applicable

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

ROOD, ED
4311 W WATERSHAW #401
TAMPA FL 33614

Name
LEE HAWKEN

Street Address (P.O. Box Number is Not Acceptable)
4311 W. WATERS AVE., SUITE 401

TAMPA, FL 33614

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 *Edward J. Edenfield IV*
Signature, typed or printed name of registered agent and title if applicable.

EDWARD J. EDENFIELD IV, PRESIDENT

4-30-2001

(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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EDENFIELD, EDWARD J IV
4311 WEST WATERS STREET #401
TAMPA FL 33614

☐ Delete

TITLE
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☐ Change ☐ Addition

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☐ 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: *Edward J. Edenfield IV* EDWARD J. EDENFIELD IV 4-30-2001 (813) 889 - 4001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)