

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000106825

1. Entity Name

ULTRA EXPRESS COMPUTER, INC.

FILED

Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90114 006 ***158.75

Principal Place of Business

7545 N.W. 70 STREET
MIAMI FL 33166

Mailing Address

7545 N.W. 70 STREET
MIAMI FL 33166-2815

2. Principal Place of Business

6801 N.W. 77 AVENUE
Suite, Apt. #, etc.
102

3. Mailing Address

6801 N.W. 77 AVENUE
Suite, Apt. #, etc.
102

City & State

MIAMI - FLORIDA

City & State

MIAMI - FLORIDA

Zip

33166

Country

USA

Zip

33166

Country

USA

6. Name and Address of Current Registered Agent

DIAZ, HENRY
7545 N.W. 70 STREET
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name OSCAR M. TORRIJOS
Street Address (P.O. Box Number is Not Acceptable) 6801 N.W. 77 AVENUE SUITE #102
City MIAMI FLORIDA FL Zip Code 33166

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

OSCAR M. TORRIJOS

01-17-2000

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	PT	<input checked="" type="checkbox"/> Delete
NAME	DIAZ, HENRY	
STREET ADDRESS	7545 N.W. 70 STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	TORRIJOS, OSCAR M	
STREET ADDRESS	7545 N.W. 70 STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TORRIJOS OSCAR M.	
STREET ADDRESS	6801 N.W. 70 STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	VS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAMOS ANA M.	
STREET ADDRESS	6801 N.W. 70 STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-17-00

Date

305-884-2612

Daytime Phone #

CR2E034 (9/99)