


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 16, 2005 8:00 am**  
**Secretary of State**

06-16-2005 90001 027 \*\*\*150.00

DOCUMENT # <b>098000107052</b>	
1. Entity Name <b>S.u. P.S. Systems, Inc</b>	

**DO NOT WRITE IN THIS SPACE**

**40088324**

2. Principal Place of Business <b>2441 Bellvue Ave</b> Suite, Apt. #, etc.	3. Mailing Address <b>1515 Ridge wood Ave</b> Suite, Apt. #, etc.
City & State <b>Daytona Bch FL</b>	City & State <b>Holly Hill FL</b>
Zip <b>32114</b> County <b>Volusia</b>	Zip <b>32117</b> County <b>Volusia</b>

DO NOT WRITE IN THIS SPACE

<b>DO NOT WRITE IN THIS SPACE</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
	7. Name and Address of Current Registered Agent	
	Name <b>Joe Loguidice</b>	
	Street Address (P.O. Box Number is Not Acceptable) <b>1515 Ridge wood Ave Ste A</b>	
	City <b>Holly Hill</b>	FL Zip Code <b>32117</b>

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 **Joe Loguidice** DATE **5/30/05**  
(NOTE: Registered Agent signature required when resigning)

January 1 - May 1: Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS			
TITLE <b>PD</b>	NAME <b>Rice Stillman</b>	TITLE	NAME
STREET ADDRESS <b>2441 Bellvue Ave</b>	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP <b>Daytona Bch FL 32114</b>	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
TITLE <b>D</b>	NAME <b>Rice Houston</b>	TITLE	NAME
STREET ADDRESS <b>2441 Bellvue Ave</b>	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP <b>Daytona Bch FL 32114</b>	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
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**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Owner Pres** DATE **4/30/05** (386) 257-2500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P. 98000107052  
Florida Department of State  
Attn: (UBR 2005)  
P O Box 6327  
Tallahassee, FL 32314-6327

40088324

June 10, 2005

Dear Sir or Madam:

As per our conversation 06/8/05 with your office, this letter is to inform your office that

We never received report for the 2005 uniform business report. We sent in a letter changing our

mailing address when the office moved. Our office spoke with a

supervisor this person advised me to let your office know of the correct address.

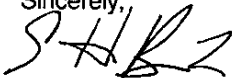
Your office also said all penalty fees would be waved due to the problems our company had with the mailing address.

Furthermore due to the hurricanes we were put behind in any processing of mail and bill paying.

Please make the Correct changes to my records and file my corporation UBR from for 2005.

Thank you for your time in concerning this matter.

Sincerely,



STILLMAN RICE  
S.U.P.S. SYSTEMS INC  
2441 BELLEVUE AVE  
DAYTONA BEACH FL 32114