

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90079 028 ***150.00

DOCUMENT # P99000008721

1. Entity Name
G4 SYSTEMS, INC.



Principal Place of Business
**9800 PREMIER PWY
MIRAMAR, FL 33025**

Mailing Address
**9800 PREMIER PWY
MIRAMAR, FL 33025**

40009397



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01242007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

65-0890022

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**YURGEALITIS, JOHN P
9800 PREMIER PKWY
HOLLYWOOD, FL 33025**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **YURGEALITIS, JOHN P**
STREET ADDRESS **14800 LEWIS ROAD**
CITY-ST-ZIP **MIAMI LAKES, FL 33014**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MARTINEZ, MANUEL R**
STREET ADDRESS **1581 BRICKELL AVENUE #1706**
CITY-ST-ZIP **MIAMI, FL 33129**

TITLE **D** ☒ Change ☐ Addition
NAME **Martinez, Manuel R**
STREET ADDRESS **3425 Alhambra Circle**
CITY-ST-ZIP **Coral Gables FL 33134**

TITLE **D** ☐ Delete
NAME **CANTILLO, ABELARDO M**
STREET ADDRESS **4032 E. RIDGEVIEW DR.**
CITY-ST-ZIP **DAVIE, FL 33330**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **GRIMM, MICHAEL**
STREET ADDRESS **7225 N.W. 41ST STREET**
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

John P. Yurgealitis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John P. Yurgealitis 01/24/07 (954) 364-0085

Date

Daytime Phone #