

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000037166

1. Entity Name

COMPUTER DATA SYSTEMS GROUP, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90118 006 ***150.00

Principal Place of Business

Mailing Address

~~8500 SW 8TH ST~~
~~SUITE 240~~
~~MIAMI FL 33144~~

~~8500 SW 8TH ST~~
~~SUITE 240~~
~~MIAMI FL 33144-4802~~

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

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

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.

SIGNATURE

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

(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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	POLLEDO, ELISEO L	
STREET ADDRESS	8500 SW 8TH ST	
CITY-ST-ZIP	MIAMI FL 33144	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENOC AGUADO
STREET ADDRESS	14735 SW 71 TERR
CITY-ST-ZIP	MIAMI FL 33139
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Enoc Delhoa
STREET ADDRESS	7500 NW 25 ST Suite #103
CITY-ST-ZIP	MIAMI FL 33123
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

DATE

Daytime Phone #

CR2E034 (9/99)

February 28, 2000

P990000037166
A0026695

Mr. Enoc Aguado, President
Mr. Guido Ochoa, Vice President/Secretary
COMPUTER DATA SYSTEMS GROUP, INC.
Miami, FL.

Ref.: Resignation

Dear Gentlemen:

The undersigned, ELISEO L. POLLEDO, who has been served as Initial Incorporator, Initial an unique Director and Registered Agent for the above named Corporatio, hereby is resigning to all the positions covered from the creation of it.

I, the undersigned director of the above named corporation, do hereby tender my resignation, to take effect as of today.

Dated: February 28, 2000



Eliseo L. Polledo
Initial Director
COMPUTER DATA SYSTEMS GROUP, INC.