

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

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90100 011 ***150.00

DOCUMENT # P99000042098

1. Entity Name

CIMA TECHNOLOGY GROUP INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14256 NW 21 ST

3. Mailing Address

14256 NW 21 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PEMBROKE PINES, FL

City & State

PEMBROKE PINES, FL

4. FEI Number

65-0966275

Applied For

Not Applicable

Zip

33028

Country

USA

Zip

33028

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DE BOCCALON, LLARIZA H

Street Address (P.O. Box Number is Not Acceptable)

14256 NW 21 ST

City

PEMBROKE PINES

FL

Zip Code

33028

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

Llariza Boccalon

Director

09/06/02

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

(NOTE: Registered Agent Signature required when raising fee)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **D**
NAME **Boccalon, Victor M**
STREET ADDRESS **14256 NW 21 ST**
CITY-STATE-ZIP **Pembroke Pines, FL 33028**

TITLE **D**
NAME **Boccalon, Yohanna**
STREET ADDRESS **14256 NW 21 ST**
CITY-STATE-ZIP **Pembroke Pines, FL 33028**

TITLE **D**
NAME **Boccalon, Miguel A**
STREET ADDRESS **14256 NW 21 ST**
CITY-STATE-ZIP **Pembroke Pines, FL 33028**

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Llariza Boccalon

Director

09/06/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachments
125139

September 9, 2002

Cima Technology Group, Inc
14256 NW 21 ST
Pembroke Pines, FL 33028
P99000042098

Division of Corporations

Previous notices of UBR were not received. Please accept the one we have send along
with a check totaling \$150.00

Thank you,

Cima Technology Group, Inc