## May 22, 2003 8:00 am Secretary of State

05-22-2003 90138 045 \*\*\*150.00

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P99000059957 **DOCUMENT #**

COMPUTER SERVICE & SOLUTIONS, INC.



					O WE THE				
Principal Place of Business 12121 N.W. 34TH STREET SUNRISE FL 33323		Mailing Address 12121 N.W. 34TH STREET SUNRISE FL 33323							
2. Principal Place of Business		3. Mailing Address				-			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State		City & State				4.	FEI Number 65-0942641	<u> </u>	pplied For lot Applicable
Zip	ip Country		Zip Co		ountry		Certificate of Status Desired	\$8.75 Ad Fee Require	Iditional
	6. Name and Address of Current	Register	ed Agent			7. 1	Name and Address of New Registered	Agent	
					Name		,		
SMITH, EVERETT A ESQ. 4801 S. UNIVERSITY DRIVE			Street Addre			(P.O. Box Number is Not Acceptable)			
STE. 305									
DAVIE FL 33328					City		Fl	Zip Cod	de
	named entity submits this statement for ions of registered agent.	r the purp	ose of changing its	registered	d office or register	red ag	ent, or both, in the State of Florida. I am	familiar with,	, and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if one	Nioshia (NOTE	C. Basistered	Agent signature required	tuboo r	einstating) DATE		
-		and the napp	I (NOTE			- WINCHIE	OALL CALL		
, Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State					Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees
10.	OFFICERS AND DIRECTORS			Ĭ1.		AC	DDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	IS IN 11
TITLE	D		☐ Delete	TITLE				☐ Change	☐ Addition
NAME	SMITH, HAYDEN			NAME	į				}
STREET ADDRESS	12121 N.W. 34TH STREET SUNRISE FL 33323				ADDRESS				
CITY-ST-ZIP	P			CITY-S	51-ZIP				
TITLE NAME	SMITH, KATHY		Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	12121 N.W. 24 STREET				ADDRESS				}
CITY-ST-ZIP	FORT LAUDERDALE FL 33323			CITY-S					}
TITLE			☐ Delete	TITLE		-		☐ Change	Addition
NAME				NAME	ľ				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-S	ST-ZIP				
TITLE			☐ Delete	TITLE	1			☐ Change	☐ Addition
NAME STREET ADDRESS				NAME	ADDRESS				
CITY-ST-ZIP	;			CITY-S					
TITLE	<u> </u>		□ Delete	TITLE				☐ Change	☐ Addition
NAME			- Ociolo	NAME	1				
STREET ADDRESS				STREET	ADDRESS			r	
CITY-ST-ZIP				CITY-S	T-ZIP				
TITLE	·		☐ Delete	TITLE		_		☐ Change	Addition
NAME				NAME					
STREET ADDRESS CITY-ST-ZIP				STREET CITY-S	ADDRESS				
Ori 1-01-21r	İ			@ GH1-9	1-41				1

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 Block 11 if changed, or on an attachment with an address with all-other-like empowered.

SIGNATURE:

- 1 U C- % SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment 50# P99000059957

Computer Service & Solutions 12121 N.W. 34 Street

Sunrise, Fl 33323

(954) 303 5806

To whom it may concern,

This is just a note to let you know that this UBR was originally mailed to the incorrect address and as a result the report is being mailed late. Can you please waive the late penalty.

Thank you very much for your understanding.

Hayden Smith

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