

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
05-28-2002 91689 046 ***150.00

DOCUMENT # P99000087947**1. Entity Name**
COMPSOURCE GROUP, INC.**Principal Place of Business****6100 SW 93RD AVE**
MIAMI FL 33173**Mailing Address****6100 SW 93RD AVE**
MIAMI FL 33173**2. Principal Place of Business**

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number**65-1093520**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****FIGUEREDO, LUIS**
C/O NAGIN GALLOP FIGUEREDO, P.A.
3225 AVIATION AVE. THIRD FLOOR
MIAMI FL 33133**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, 2002 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**

TITLE	D	<input type="checkbox"/> Delete
NAME	MARQUEZ, GABRIEL	
STREET ADDRESS	6100 SW 93RD AVE	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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 my address with all other like empowered.**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

May 1, 2002

Attachment
P99000087947

CompSource Group, Inc.
c/o Gabriel Marquez
6100 SW 93rd Avenue
Miami, Fl. 33173

Document # P99000087947

Fl. Dept. of State
Division of Corp.
PO Box 6327
Tallahassee, Fl. 32314

To Whom it May Concern;

I recently filed my Uniform Business Report a few days prior to the deadline of May 1st. A few days later I received my file document from the US post office, claiming I had not provided postage for delivery.

This was an over sight on my part. However, it was not done with any bad intent. I and therefore requesting that you wave the \$400.00 late charge with my apologies and assurance that this will never happen again.

Sincerely


Gabriel Marquez