FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

(ul?

DOCUMENT # P99000095576 1. Entity Name			FILED	
SYSTEM INDUSTRIAL TECHNOLOGIC, INC.			02 AUG 23 PM 12: 07	
DO NOT WRITE IN THIS SPACE			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Place of Business	3. Mailing Address	-		
7951 SW 40 ST. Suite, Apt. #, etc. SUITE: 206	7951 SW 40 ST Suite, Apt. #, etc. SUITE: 206	1.	(DONOZARIJE NI JAIS SPACE) B	
City & State MIAMI, FL	City & State MIAMI; FL		4. FEI Number 0698 621 Applied For Not Applicable	
Zip Country 33155	Zip 33155	Country	5. Certificate of Status Desired See Required	
00.00	50100	Name O L D	7. Name and Address of Current Registered Agent	
DO NOT WRITE IN THIS SPACE		U.J. U	P.O. Box Number is Not Acceptable)	
		7951 SW 4	0 ST. STE: 206	
		City MIAMI	FL Zip Code 33155	
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. (h	NOTE: Registered Agent signature required	8-22-02 d when reinstating) DAIL	
Tax filing requirement and elects to do so. After May 1, F Amended U		- May 1 Fee is \$150.00 ay 1, Fee is \$550.00 ded UBR is \$61.25 yable to Department of Sta	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
11. OFFICERS AND DIRECTORS				
7951 SW 40 S1. STE:206		NAME STREET ADDRESS CITY-ST-ZIP	THE STUDIES ST	
TITLE NAME		TITLE NAME		
STREET ADDRESS CITY-ST-ZIP /		STREET ADDRESS CATY_ST-ZIP	\$	
near .		TITLE NAME		
STREET ADDRESS . STR		STREET ADDRESS GITY-ST-ZIP	TREST ADDRESS DO NOT WRITE	
3		TITLE NAME		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS City-St-71P	0 0	
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STREET ADDRESS STREE		STREET ADDRESS CITY-ST-ZIP	/////	
		TIFLE NAME		
STREET ADDRESS STRE		STREET ADDRESS CRIY-ST-ZP	- U	
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 on an attachment with an address, with all other like empowered.				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DISC Disconsistance of Signing Officer or Director Disconsistance of Signing Officer Or Disconsistance of Signing Offi				

SYSTEM INDUSTRIAL TECHNOLOGIC, INC. DOC. # P99000095576



TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE OF SUCH REPORT. THE STREET NUMBER OF THE ADDRESS IS INCORRECT THIS COULD BE WHY I NEVER GOT ANY NOTICES. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY

PATRICIA S. CORTES

PRESIDENT