

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90004 018 ***150.00

DOCUMENT # S62341

1. Entity Name

COMPUTER PLACE REPAIRS, INC.

Principal Place of Business

Mailing Address

**5303-A EAST COLONIAL DRIVE
ORLANDO FL 32807**

**5303-A EAST COLONIAL DRIVE
ORLANDO FL 32807-1865**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3070153

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

**KELLER, DEBRA D.
1177 LOUISIANA AVE STE 100
WINTER PARK FL 32832**

Name

JEDAIAS L NORBERTO

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

3732 RUNNING DEER DR.

City

ORLANDO

FL

Zip Code

32829

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

Jedaias Norberto

JEDAIAS NORBERTO

01-18-2000

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** ☐ Delete
NAME **NORBERTO, M. HELENA L.**
STREET ADDRESS **3732 RUNNING DEER DRIVE**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **NORBERTO, JEDAIAS L.**
STREET ADDRESS **3732 RUNNING DEER DRIVE**
CITY-ST-ZIP **ORLANDO FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ 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:

Jedaias Norberto
JEDAIAS NORBERTO

01-18-2000

Date

Daytime Phone #

407-382-1055

CR2E034 (9/99)