

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #

575304

1. Corporation Name

SYSTEMATIC BUSINESS COMPUTERS, INC.

Principal Place of Business

Mailing Address

15101 NE 21<sup>st</sup> Ave  
Miami, FL 33162

15101 NE 21<sup>st</sup> Ave  
Miami, FL 33162

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

15101 NE 21<sup>st</sup> Ave

3. New Mailing Office Address, If Applicable

15101 NE 21<sup>st</sup> Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33162

Country

USA

Zip

33162

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

8/23/91

5. FEI Number

65-0279212

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	Fernandez, David	14672 SW 50 <sup>th</sup> Terr	Miami, FL 33176
D	Neiman, Eddie	801 NE 171 <sup>st</sup> Street Miami, FL 33162	Miami, FL 33162

REINSTATEMENT

97-98

FL 8-12-98

8. Name and Address of Current Registered Agent

Neiman, Eddie  
801 NE 171 St.  
Miami, FL 33162

9. Name and Address of New Registered Agent

Name  
Neiman Eddie  
Street Address (P.O. Box Number is Not Acceptable)  
801 NE 171 St.  
Suite, Apt. #, Etc.

City  
Miami

State  
FL

Zip Code  
33162

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

Eddie Neiman

REGISTERED AGENT MUST SIGN

Date

8/5/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eddie Neiman

8/5/98  
Date

305 948-9111  
Daytime Phone #

CR25040 (1-98)