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

Mailing Address

## V09724 **DOCUMENT#**

1. Entity Name

Principal Place of Business

PROFESSIONAL COMPUTER CONSULTING, INC.



## FILED Feb 05, 2003 8:00 am Secretary of State 02-05-2003 90148 022 \*\*\*150.00

6500 FALCONS DAVIE FL 3333		•	DAVIE	6500 FALCONSGATE AVE DAVIE FL 33331				80021829			
US			U\$	U\$							
2. Principal P	lace of Busine	SS	<b>3.</b> Mai	3. Mailing Address				1 (684) 81181, 88118 (811) (881) 1181 8181 8	1011 07011 01011 01011 01	911 B)3)1 1881	
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State	e		City	City & State				4. FEI Number 65-0318128 Applied For Not Applicable			
Zip	Country			Zip		Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent							7. 1	Name and Address of New Registe	ered Agent	•	
						Name					
DUGGAN, PAUL D.				Charles A delegan (			/O.O. D	CO. Bou Niverbos in Not Accordable)			
6500 FALC	CONSGATE A	\VE		Street Address			SS (P.U. B	(P.O. Box Number is Not Acceptable)			
DAVIE FL	. ~:										
DAVIE FE	,}										
•				City					FL Zip Code	e Ì	
The above named entity submits this statement for the purpose of changing its registrenament.						d office or roai	atarad aa	ent or both in the State of Elorida		and account	
	named entity ions of register		it for the purp	ose of changing its i	registert	ed office of regi	stered ag	erit, or botti, in the State of Florida.	ram ammar widi,	and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
		FFF 10 A450 00									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00								9. Election Campaign Financin	g \$5.0 <sup>4</sup>	О мау Ве	
					Trust Fund Contribution.		I to Fees				
Make Check	k Payable to	Florida Departmen	<u></u>								
10.	· A · · · · · · · · · · · · · · · · · ·	RS	S 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
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NAME	DUGGAN, P				NAM	-					
						TADDRESS					
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indicated	on this report	ı ılarmatıcı suppiled v or supplemental repo	with this filing rt is true and	accurate and that m	me exer y signat	implion stated ir ture shall have t	he same l	119.07(3)(i), Florida Statutes. I furthe legal effect as if made under oath; the	я сегиту that the in nat 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:

Daytime Phone #