

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90094 021 ***158.75

DOCUMENT # P99000027781

1. Entity Name
C4 COMPUTERS, INC.

Principal Place of Business

12942 KIRBY SMITH RD
ORLANDO FL 32832

Mailing Address

12942 KIRBY SMITH RD
ORLANDO FL 32832

2. Principal Place of Business

12942 KIRBY SMITH RD

Suite, Apt. #, etc.

3. Mailing Address

12942 KIRBY SMITH RD

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

ORLANDO FL

City & State

ORLANDO FL

4. FEI Number

65-0904086

Applied For

Not Applicable

Zip
32832

Country
ORANGE

Zip
32832

Country
ORANGE

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

COOKE, MARK C
12942 KIRBY SMITH RD
ORLANDO FL 32832

7. Name and Address of New Registered Agent

Name **Mark C. Cooke**
Street Address (P.O. Box Number is Not Acceptable) **12942 Kirby Smith Rd**
City **ORLANDO** **FL** **Zip Code** **32832**

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, applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-22-02

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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **COOKE, MARK C**
STREET ADDRESS **12942 KIRBY SMITH RD**
CITY-ST-ZIP **ORLANDO FL 32832**

TITLE **VP** ☐ Delete
NAME **COOKIE, KELLEY C**
STREET ADDRESS **12942 KIRBY SMITH RD**
CITY-ST-ZIP **ORLANDO FL 32832**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARK C. COOKE **2/22/02** **407-321-8490**

CR2E034 (9/01)