

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005119

Entity Name: U.S. DATA CAPTURE, INC.

FILED
Jul 09, 2007
Secretary of State

Current Principal Place of Business:

800 WESTCHESTER AVENUE
5TH FLOOR
RYE BROOK, NY 10573

New Principal Place of Business:

Current Mailing Address:

800 WESTCHESTER AVEUNE
5TH FLOOR
RYE BROOK, NY 10573

New Mailing Address:

FEI Number: 13-3631398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERIO, ROBIN
225 POTTER ROAD
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GATOF, PETER
Address: 99 MAMARONECK ROAD
City-St-Zip: SCARSDALE, NY 10583

Title: VP () Delete
Name: GATOF, BONNIE
Address: 99 MAMARONECK ROAD
City-St-Zip: SCARSDALE, NY 10583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER A GATOF

PRES

07/09/2007

Electronic Signature of Signing Officer or Director

Date