

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000075741

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: DATA RECOVERY LABS, INC.

## Current Principal Place of Business:

29296 US 19 N  
101  
CLEARWATER, FL 33761 US

## New Principal Place of Business:

2045 LAWSON ROAD  
CLEARWATER, FL 33763 US

## Current Mailing Address:

29296 US 19 N  
101  
CLEARWATER, FL 33761 US

## New Mailing Address:

2045 LAWSON ROAD  
CLEARWATER, FL 33763 US

FEI Number: 59-3407197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHARP, ADAM D  
29296 US 19 N  
101  
CLEARWATER, FL 33761

## Name and Address of New Registered Agent:

SHARP, ADAM D  
2045 LAWSON ROAD  
CLEARWATER, FL 33763

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: ADAM D. SHARP

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SHARP, ADAM D  
Address: 29296 US 19 101  
City-St-Zip: CLEARWATER, FL 33761

Title: CEO ( ) Delete  
Name: SHARP, ADAM D  
Address: 29296 US 29 N 101  
City-St-Zip: CLEARWATER, FL 33761

Title: DV ( ) Delete  
Name: SHARP, DAVID A  
Address: 29296 US 19 N 101  
City-St-Zip: CLEARWATER, FL 33761

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SHARP, ADAM D  
Address: 2045 LAWSON ROAD  
City-St-Zip: CLEARWATER, FL 33763

Title: CEO (X) Change ( ) Addition  
Name: SHARP, ADAM D  
Address: 2045 LAWSON ROAD  
City-St-Zip: CLEARWATER, FL 33763

Title: DV (X) Change ( ) Addition  
Name: WALKER, CHRISTOPHER R  
Address: 2045 LAWSON ROAD  
City-St-Zip: CLEARWATER, FL 33763

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ADAM SHARP

CEO

04/30/2002

Electronic Signature of Signing Officer or Director

Date