2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with ar

address, with all other like empowered

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 18, 2002 8:00 am Secretary of State P99000005927 DOCUMENT # 1. Entity Name 04-18-2002 90429 024 ***150.00 JDI DATA CORPORATION Principal Place of Business Mailing Address 831 N.W. 7TH TERRACE 940478 831 N.W. 7TH TERRACE FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0889633 Not Applicable \$8.75 Additional 5. Certificate of Status Desired >7.-Name and Address of New Registered Agent ← Name and Address of Current Registered Agent DEROSA, JAMES 831 N.W. 7TH TERRACE FT LAUDERDALE FL 33311 8. The above named entity subthits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 4-8-2002 SIGNATURE (NOTE: Registered Agent signature required when reinstating) d agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE DEROSA, JAMES NAME NAME 831 N.W. 7TH TERRACE, STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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