

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 608500

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: DATA ENTRY PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:

8390 NW 53 ST., #201
P.O. BOX 523350
MIAMI, FL 33166

New Principal Place of Business:

8390 NW 53 ST., #201
201
MIAMI, FL 33166

Current Mailing Address:

8390 NW 53 ST., #201
P.O. BOX 523350
MIAMI, FL 33166

New Mailing Address:

8390 NW 53 ST., #201
201
MIAMI, FL 33166

FEI Number: 59-1888710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IZQUIERDO, MARIA R
8390 NW 53 ST.
SUITE # 201
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

IZQUIERDO, MARIA R
8390 NW 53 ST.
SUITE # 201
MIAMI, FL 33166 US

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: MARIA R. IZQUIERDO

04/26/2002

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: PD () Delete
Name: IZQUIERDO, MARIA R,
Address: 421 S.W. 87TH COURT
City-St-Zip: MIAMI FL,

Title: STD () Delete
Name: IZQUIERDO, TERESA E,
Address: 411 S.W. 87TH COURT
City-St-Zip: MIAMI FL,

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 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: MARIA R. IZQUIERDO

PD

04/26/2002

Electronic Signature of Signing Officer or Director

Date