

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State
 03-27-2002 90093 013 ***150.00

DOCUMENT # 844280

1. Entity Name
DIVERSIFIED TRIMODAL, INC.

Principal Place of Business
55 GLENLAKE PARKWAY, NE
ATLANTA GA 30328
US

Mailing Address
55 GLENLAKE PKWY NE
ATLANTA GA 30328
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **06-1007042**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **AS**
PICA, EUGENE A ☐ Delete
 STREET ADDRESS **55 GLENLAKE PKWY NE**
 CITY-ST-ZIP **ATLANTA GA**

TITLE
 NAME **AS | AT** ☒ Change ☐ Addition
 STREET ADDRESS **Eugene A. Pica**
 CITY-ST-ZIP **55 Glenlake Pkwy NE**
Atlanta, GA 30328

TITLE
 NAME **DPC** ☐ Delete
DIMAGGIO, DANIEL P
 STREET ADDRESS **55 GLENLAKE PKWY NE**
 CITY-ST-ZIP **ATLANTA GA 30328**

TITLE
 NAME **DC** ☐ Change ☒ Addition
 STREET ADDRESS **Michael L. Eskew**
 CITY-ST-ZIP **55 Glenlake Pkwy NE**
Atlanta, GA 30328

TITLE
 NAME **VTS** ☒ Delete
ANDERSON, DOUGLAS
 STREET ADDRESS **55 GLENLAKE PKWY NE**
 CITY-ST-ZIP **ATLANTA GA 30328**

TITLE
 NAME **V.** ☐ Change ☒ Addition
 STREET ADDRESS **David Baer**
 CITY-ST-ZIP **55 Glenlake Pkwy NE**
Atlanta, GA 30328

TITLE
 NAME **D** ☒ Delete
FREDO, PETER
 STREET ADDRESS **55 GLENLAKE PKWY NE**
 CITY-ST-ZIP **ATLANTA FL 30328**

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 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 REQUIRED
Eugene A. Pica

3-13-02

(404) 228-6093

Date

Daytime Phone #

CR2E034 (9/01)