

2000 UNIFORM BUSINESS REPORT (UBR)

0010601

DOCUMENT # A97000001026

1. Entity Name

DTI GROUP, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CO APR 19 AM 11:43

Principal Place of Business

17340 W CARNEGIE CIRCLE

#105B

FT. MYERS FL 33912

Mailing Address

17340 W CARNEGIE CIRCLE

#105B

FT. MYERS FL 33912-5821



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0797322

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

D.T. INVESTMENTS INC. OF SOUTHWEST FLORIDA

17340 W CARNEGIE CIRCLE

#105B

FT. MYERS FL 33912

7. Name and Address of New Registered Agent

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. Capital Contributions as Shown on record.

\$7,500.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P97000020945
NAME D.T. INVESTMENTS, INC. OF SOUTHWEST FLORID
STREET ADDRESS 17340 W CARNEGIE CIRCLE #105B
CITY - ST - ZIP FT. MYERS FL 33912

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

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STREET ADDRESS

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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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Pres. DT Investment Inc 4-15-00

Date

971-994-0162

Daytime Phone #