**FILED** 

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Jan 16, 2002 8:00 am **Secretary of State** F51928 DOCUMENT # 1. Entity Name 01-16-2002 90209 001 \*\*\*158.75 DANTZLER, INC. Principal Place of Business Mailing Address 7975 N.W. 154TH STREET, SUITE 240 7975 N.W. 154TH STREET, SUITE 240 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-0213620 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FOTOPULOS, THOMAS E Street Address (P.O. Box Number is Not Acceptable) 707 N FRANKLIN ST STE 725 **TAMPA FL 33602** City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (9/01) ☐ Addition TITLE ☐ Delete TITLE GODINEZ, ANTONIO D NAME NAME 121 CAPE FLORIDA DRIVE STREET ADDRESS STREET ADDRESS KEY BISCAYNE FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition POTTER, VAUGHN L NAME NAME 9187\_FOUNTAINBLEAU BLVD., #3 STREET ADDRESS STREET ADDRESS MIAMI FL 33172-6312 CITY-ST-ZIP CITY-ST-ZIP VΡ TITLE ☐ Delete Change ☐ Addition TITLE NOBLE, MIKE NAME NAME STREET ADDRESS **BOISE WAY** STREET ADDRESS COOPER CITY FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition FERNANDEZ, LUIS J NAME STREET ADDRESS PO BOX 362108, N/A STREET ADDRESS SAN JUAN, PUERTO RICO 00936-2108 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NONES, LARRY 9371 S.W. 118TH PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33186** CITY-ST-ZIP TITLE ☐ Change ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

THE VAUGUA LOOK TOCK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: