

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002811

1. Entity Name

NSTOR TECHNOLOGIES, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90285 012 ***150.00

Principal Place of Business

100 CENTURY BLVD
WEST PALM BEACH FL 33417

Mailing Address

100 CENTURY BLVD
WEST PALM BEACH FL 33417

DUUJ768J



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10140 Mesa Rim Road

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

San Diego, CA

City & State

4. FEI Number

95-2094565

Applied For

Not Applicable

Zip

92121

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JAIVEN, JACK
100 CENTURY BLVD
WEST PALM BEACH FL 33417

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's 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, 2001 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

| | | |
|----------------------------------------------------|------------------------------------------------------------------------|---------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP HAMMERICH, LARRY 100 CENTURY BLVD WEST PALM BEACH FL 33417 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | S FLOYD, ORILLA F 100 CENTURY BLVD WEST PALM BEACH FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D WISE, MICHAEL L 285 TANGLEWOOD CROSSING LAWRENCE NY | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | CD LEVY, H I 100 CENTURY BLVD WEST PALM BEACH FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D GREEN, BERNARD R 100 CENTURY BLVD WEST PALM BEACH FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VT JAIVEN, JACK 100 CENTURY BLVD WEST PALM BEACH FL 33417 | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D P Hemmerich, Larry 10140 Mesa Rim Road San Diego, CA 92121 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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 of 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:

Jack Jaiven

Jack Jaiven, Vice President

1/19/01

(561) 640-3105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)