

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 AUG 21 PM 12:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000006349

1. Entity Name

DataMetrics Corporation



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1717 Diplomacy Row

Suite, Apt. #, etc.

3. Mailing Address
1717 Diplomacy Row

Suite, Apt. #, etc.

REINSTATEMENT 02-03

DO NOT WRITE IN THIS SPACE

City & State
Orlando FL

City & State
Orlando FL

4. FEI Number 95-3545701

Applied For
Not Applicable

Zip
32809

Country
U.S.

Zip
32809

Country
U.S.

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

7. Name and Address of Current Registered Agent

Name Daniel Bertram

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

1717 Diplomacy Row

City Orlando

FL

Zip Code
32809

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Daniel Bertram

August 18, 2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CEO / President
Daniel Bertram
1717 Diplomacy Row Orlando FL 32809

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Corporate Secretary
Gary Herman
1717 Diplomacy Row Orlando FL 32809

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Director
Bruce Galloway
1717 Diplomacy Row Orlando FL 32809

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Director
Tom Leonardis
1717 Diplomacy Row Orlando FL 32809

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12. 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 10 or on an attachment with an address, without other like empowered.

SIGNATURE:

Daniel Bertram

8/18/03

407-251-4577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

7/8/21