

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90090 015 ***158.75

00043136

DO NOT WRITE IN THIS SPACE

DOCUMENT # F99000000143
1. Entity Name
 Global DataTel, Inc.

Principal Place of Business **Mailing Address**
 3333 S. Congress Avenue, Suite #404
 Delray Beach, Florida 33445

2. Principal Place of Business **3. Mailing Address**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 #404 #404

City & State **City & State**
 Delray Beach, Florida

4. FEI Number **Applied For**
 87-0067813 Not Applicable

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

Zip **Country** **Zip** **Country**
 33445 US 33445 US

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

Gerald D'Ambrosia
 670 SW 7th Street
 Boca Raton, FL

Name: **Richard Baker**
 Street Address (P.O. Box Number is Not Acceptable):
 3333 S. Congress Avenue
 Suite #404
 City: Delray Beach, FL FL Zip Code: 33445

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 **Richard Baker** *[Signature]* **3/7/00**
 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. **FILE NOW!!! FEE IS \$150.00**
 (See criteria on back) **After MAY 1, 2000 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	President	<input type="checkbox"/> Delete	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard Baker		NAME	Richard Baker	
STREET ADDRESS	4400 NW 19 Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE	Secretary	<input checked="" type="checkbox"/> Delete	TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gerald D'Ambrosio		NAME	Antonio Serrato	
STREET ADDRESS	4400 NW 19th Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE	Treasurer	<input checked="" type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael DeMarie		NAME	Richard Baker	
STREET ADDRESS	4400 NW 19th Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE	Vice President	<input type="checkbox"/> Delete	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Antonio Serrato		NAME	Antonio Serrato	
STREET ADDRESS	4400 NW 19th Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE	Chairman	<input type="checkbox"/> Delete	TITLE	Chairman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard Baker		NAME	Richard Baker	
STREET ADDRESS	4400 NW 19th Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	
TITLE	Director	<input type="checkbox"/> Delete	TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Antonio Serrato		NAME	Antonio Serrato	
STREET ADDRESS	4400 NW 19th Ave.		STREET ADDRESS	3333 S. Congress Ave. #404	
CITY-ST-ZIP	Pompano Beach, FL 33064		CITY-ST-ZIP	Delray Beach, FL 33445	

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]* **3/7/2000** **(561) 276-8260**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)