2002 Uniform Business Report (UBR)

FILED May 22, 2002 8:00 am

DOCUMENT # F9900003947 1. Entity Name SMART START IGNITION INTERLOCK, INC.			Secretary of State 05-22-2002 90239 044 ***150.00		
Principal Place of Business	Mailing Address	V	-		
4850 PLAZA DRIVE IRVING TX 75063	4850 PLAZA DRIVE IRVING TX 75063				
			9		
2. Principal Place of Business 3. Mailing Add		=	DO NOT WRITE IN THIS SPACE		
Suite, Apt. #, etc. Suite, Apt. #, etc.					
City & State City & State			4. FEI Number 75-2447950	Applied For Not Applicable	
Zip Country	Zip	Country	E Contificate of Status Desired	3.75 Additional	
6. Name and Address of Current Registered Agent		1	7. Name and Address of New Registered Agent		
		Name	·		
TUNKEL, IRENE 300 E.LAKEWOOD CIRCLE MARGATE FL 33083		Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
		City	City FL Zip Code		
B. The above named entity submits this statement \$\frac{\dagger}{\dagger} \frac{\dagger}{2} \] SIGNATURE Signature, typed or privide name of registered as:	, , , , , ,	ts registered office or regis DTE: Registered Agent signature requ			
Tax filling requirement and elects to do so. After May 1, 2002		VIII FEE IS \$150.00 1002 Fee will be \$550.00 able to Department of S		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12.			
TITLE D NAME ADAMS, FRANK STREET ADDRESS CITY-ST-ZIP DALLAS TX 75205		TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition (50)	
INTLE DST NAME BALLARD, JAMES R STREET ADDRESS .4850.PLAZA.DRIVE	DST Delete BALLARD, JAMES R 4850.PLAZA.DRIVE			Change Addition S	
TITLE D NAME HAMMER, DAVID W				Change	
STREET ADDRESS 4419 LANDPIPER COURT DALLAS TX 75287	· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS CITY-ST-ZIP			
TITLE D HICKS, SYDNEY STREET ADDRESS CITY-ST-ZIP DALI AS TX 75225	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	

CITY-ST-ZIP FLOWER MOUND TX 75022 13. Thereby 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 exaddress, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-SI-ZIP.

DALLAS TX 75225

RODGERS, JAY D

RODGERS, BETTYE A

FLOWER MOUND TX 75022

ROUTE 3, BOX 600, LATIGO LANE

ROUTE 3, BOX 600, LATIGO LANE

☐ Delete

Delete

972 621 0252

☐ Change.

☐ Change 1. ☐ Addition

☐ Addition

Daytime Phone #