2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Jan 26, 2000 8:00 am Secretary of State **DOCUMENT # H08733** 1. Entity Name DATA INTERNATIONAL SYNERGISTIC COMPANY, INC. 01-26-2000 90128 016 ***150.00 Principal Place of Business Mailing Address 3800 PROGRESS BLVD 3800 PROGRESS BLVD 907535 MOUNT DORA FL 32757 MOUNT DORA FL 32757-2206 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2395772 Not Appelle Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WELTER, RÖBERT K. Street Address (P.O. Box Number is Not Acceptable) 3800 PROGRESS BLVD. MOUNT DORA FL 32757 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 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 12. 11. **X** Change ☐ Addition TITLE TITLE ☐ Delete Welter, R.K. WELTER, R.K. NAME NAME 1851 MORRIS ST. STREET ADDRESS STREET ADDRESS 1203 MARSHALL CT FUSTIS, FL 32726 CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 ☐ Delete Change Addition TITLE MARGARET A. PARENT NAME NAME STREET ADDRESS STREET ADDRESS 3800 PROGRESS BLVD CITY-ST-ZIP CITY-ST-7IP **MOUNT DORA FL 32757** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME WELTER, MELINDA NAME STREET ADDRESS STREET ADDRESS 1851 MORRIS ST CITY-ST-ZIP CITY-ST-7IP EUSTIS FL 32726 ☐ Addition TITLE Change TITLE ☐ Delete ROBERT K. WELTER III NAME NAME STREET ADDRESS STREET ADDRESS 1818 HILLTOP DR. CITY-ST-ZIP CITY-ST-ZIP MT. DORA FL 32757 ☐ Change Addition TITLE ☐ Delete MICHAEL S. WELTER NAME NAME STREET ADDRESS STREET ADDRESS 3800 PROGRESS BLVD CITY-ST-ZIP CITY-ST-ZIP **MOUNT DORA FL 32757** ☐ Addition ☐ Change ☐ Delete TITLE TITLE ROBERT K. WELTER SR. NAME NAME STREET ADDRESS 3800 PROGRESS BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MOUNT DORA FL 32757** ualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am an officer or director report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with the indicated on this report or supplemental report of the corporation or the receiver or trust pelein

NAME OF SIGNING OFFICER OR DIRECTOR