

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K80407

1. Entity Name

GLOBAL DIGITAL SOLUTIONS, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90194 021 ***150.00

Principal Place of Business

3601 N. DIXIE HIGHWAY
SUITE 5
BOCA RATON FL 33431

Mailing Address

3601 N. DIXIE HIGHWAY
SUITE 5
BOCA RATON FL 33431

2. Principal Place of Business

3208 LIDDY AVE
Suite, Apt. #, etc.

3. Mailing Address

3208 LIDDY AVE
Suite, Apt. #, etc.

City & State

WEST PALM BEACH FL

City & State

WEST PALM BEACH, FL

Zip

33407

Country

PALM BEACH

Zip

33407

Country

PALM BEACH

4. FEI Number

59-2944814

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIS, HOMER F
3208 CIDDY AVE.
WEST PALM BEACH FL 33407

7. Name and Address of New Registered Agent

Name

WILLIS HOMER F

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

3208 LIDDY AVE

City

WEST PALM BEACH FL

Zip Code

33407

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)

DATE

4/24/01

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 VP
NAME TAMBLING, KENT
STREET ADDRESS 5400 NW 39TH AVENUE, #B-11
CITY-ST-ZIP GAINESVILLE FL 32606 ☒ Delete

TITLE
NAME PST
STREET ADDRESS WILLIS, HOMER F IV
CITY-ST-ZIP 1019 RUSSEL DRIVE, APT. 2
HIGHLAND BEACH FL 33487 ☐ Delete

TITLE
NAME P
STREET ADDRESS WILLIS, HOMER F
CITY-ST-ZIP 1019 RUSSELL DR. # 2
HIGHLAND BEACH FL 33431 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3208 LIDDY AVE
CITY-ST-ZIP WEST PALM BEACH, FL 33407 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3208 LIDDY AVE
CITY-ST-ZIP WEST PALM BEACH, FL 33407 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

CR2E034 (10/00)