2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K80407 1. Entity Name GLOBAL DIGITAL SOLUTIONS, INC.					Jan 30, 2002 8:00 am Secretary of State 01-30-2002 90055 004 ***150.00			
3208 LIDDY	ce of Business AVE BEACH FL 33407	Mailing Address 3208 LIDDY AVE SUITE 5 WEST PALM BEACH FL 334	IDDY AVE 5					
	SE ZNO AUE	3. Mailing Address 2 0 5 E Z N A Suite, Apt. #, etc.	VE #	40/		E IN THIS SPACE		
Zip	VESVICE, FC	City & State CONTROL Zip	Country	-	4. FEI Number 59-29448145. Certificate of Status Desired	· —	applied For lot Applicable]
3260	6. Name and Address of Current Re	Zip 3 26 0 / gistered Agent	ACAC	NON	7. Name and Address of New Ro	Fee Requir		
	HOMER F DY AVE ALM BEACH FL 33407		City	et Address (P. 1 201 CAN	O. Box Number is Not Acceptable SEZNO AVE VESVILLE FO	FL Zip.Cog	te 60/	
SIGNATURE 9. This corpo Tax filing i	e named entity submits this statement for the iname of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	411.	egistered Agent si FEE IS \$1 Fee will be	gnature required who	nen reinstating) 10. Election Campaign Fina Trust Fund Contribution	S CATE	00 May Be	
11.	OFFICERS AND DIF	RECTORS	12.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	S IN 11	
TITLE *NAME STREET ADDRESS CITY - ST-ZIP	PST WILLIS, HOMER F IV 3208 LIDDY AVE WEST PALM BEACH FL 33407	☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	S 201 5	US, HOMEN FIV SE ZNO AVE # JESVILLE, FL 3		☐ Addition	12E034 (9/01)
TITLE Name Street address City-St-Zip	P WILLIS, HOMER F 3208 LIDDY AVE WEST PALM BEACH FL 33407	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	P WILLI S Z 208	S, HOMEN F 2015E VESVILLE, FL	Gethange F ZND AVE	☐ Addition	CR
TITLE HAME STREET ADDRESS SITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP			☐ Change	☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s		∠ ☐ Change	☐ Addition	
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ITLE AME TREET ADDRESS ITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s		☐ Change	☐ Addition	
of the corp	ertify that the information supplied with this on this report or supplemental report is tru poration or the receiver or truster empowe or on an attachment with an address, with	e and accurate and that my s red to execute this report as	idnature sha	I have the can	ne legal effect se if made under ea	the that I am an officer	or director	

SIGNATURE: