

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L50740
1. Entity Name
DGSG, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State
02-29-2000 90142 029 ***150.00

Principal Place of Business
1475 W CUPRESS CREEK RD
SUITE 204
FT LAUDERDALE FL 33309

Mailing Address
1475 W CUPRESS CREEK RD
SUITE 204
FT LAUDERDALE FL 33309-1931
US

310212



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 65-0181704
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
THIRER, MARTIN
1475 W CYPRESS CREEK RD
STE 204
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

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, 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

<input type="checkbox"/> Delete	D GOLDING, STEPHEN 1101B HIGHLAND BCH DRIVE HIGHLAND BCH FL 33487
<input type="checkbox"/> Delete	
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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: STEPHEN M. GOLDING
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 2-16-00 Daytime Phone # (954) 772-7878

CR2E034 (9/99)