

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000015462

1. Entity Name

DLA CONSULTING, INC.

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90051 004 ***150.00

Principal Place of Business

6310 WILEY STREET
HOLLYWOOD FL 33023

Mailing Address

6310 WILEY STREET
HOLLYWOOD FL 33023

2. Principal Place of Business

577 S.W. 111 LANE

Suite, Apt. #, etc.

202

3. Mailing Address

577 S.W. 111 LANE

Suite, Apt. #, etc.

202

City & State

PEMBROKE PINES, FL

Zip

33025

Country

U.S.A.

City & State

PEMBROKE PINES, FL

Zip

33025

Country

USA

4. FEI Number

65-0983274

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDUJAR, DALCIO L
6310 WILEY STREET
HOLLYWOOD FL 33023

7. Name and Address of New Registered Agent

Name

DALCIO ANDUJAR

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

577 S.W. 111 LANE #202

City

PEMBROKE PINES

FL

Zip Code

33025

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.

DALCIO ANDUJAR, PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE

1/26/01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANDUJAR, DALCIO L
6310 WILEY STREET
HOLLYWOOD FL 33023

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11-

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.S.T.
DALCIO ANDUJAR
577 S.W. 111 LANE #202
PEMBROKE PINES, FL 33025

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

Salcio Andujar

DALCIO ANDUJAR
PRESIDENT

1/26/01

305-93-7271

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)