

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/3

FILED

Apr 19, 2001 8:00 am  
Secretary of State

04-03-2001 90012 033 \*\*\*150.00

DOCUMENT # P00000021592

1. Entity Name  
EDIRECT, INC.

Principal Place of Business Mailing Address  
6601 PARK OF COMMERCE BLVD. 6601 PARK OF COMMERCE BLVD.  
BOCA RATON FL 33487 BOCA RATON FL 33487

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65-1024199 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

MILLER, ALISON W  
2200 MUSEUM TOWER, 150 WEST FLAGLER ST.  
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name Kenneth J. Schwartz  
Street Address (P.O. Box Number is Not Acceptable) 6601 Park of Commerce Blvd  
City Boca Raton FL Zip Code 33487

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 *Kenneth J. Schwartz* 3/15/01  
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, 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	D	<input checked="" type="checkbox"/> Delete
NAME	ASHER, HANK	
STREET ADDRESS	6601 PARK OF COMMERCE BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BRAUSER, MICHAEL	
STREET ADDRESS	6601 PARK OF COMMERCE BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dale Renner	
STREET ADDRESS	6601 Park of Commerce Blvd	
CITY-ST-ZIP	Boca Raton FL 33487	
TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Christiane Breton	
STREET ADDRESS	6601 Park of Commerce Blvd	
CITY-ST-ZIP	Boca Raton FL 33487	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Charles Butts* 3/20/01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)