5/16/01-90401-046-$150.00-$150.00

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 18 PM 2:05

DOCUMENT # P00000024548

1. Entity Name
DASTO AMTEL, INC.

(LA)

Principal Place of Business	Mailing Address
6126 OAK CLUSTER CIRCLE TAMPA FL 33634	6126 OAK CLUSTER CIRCLE TAMPA FL 33634

[redacted]

DO NOT WRITE IN THIS SPACE

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 59-3632112 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CAIRNS, KATERINA D 6126 OAK CLUSTER CIRCLE TAMPA FL 33634	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete P KATERINA D CAIRNS 6126 OAK CLUSTER CIRCLE TAMPA FL 33634	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E084 (1/00)

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: Katerina KATERINA CAIRNS 4.30.01 813.890.9103
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #

Dasto Amtel

October 12, 2001

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314
Attn. Robin

RE: Attach the following to our original copy that was received paid.

Dear Robin,

Per our telephone conversation today, we have enclosed the following correspondence between the Florida Department of State and our Certified Public Accountant firm in which the FDS acknowledged receipt of our corporate paper filing and fee.

Our response to the FDS was accurate and in a timely manner.

Please attach the enclosed from our CPA to the original documentation.

If you have any questions please do not hesitate to contact me.

Sincerely,

Katerina D. Cairns
President

3803 West Gray Street Tampa, Florida 33609 U.S.A.
amtel @ dasto.com
813.874.1274 fax: 813.874.5506 toll free: 800.897.7151