

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000024548

1. Entity Name

DASTO AMTEL, INC.

(LA)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 OCT 18 PH 2:05

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; 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

CAIRNS, KATERINA D  
6126 OAK CLUSTER CIRCLE  
TAMPA FL 33634

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of agent of principal (must be registered agent for this corporation)

Signature of Registered Agent (must be registered agent for this corporation)

DATE

9. This corporation is eligible to satisfy its biennial  
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 \$350.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIPP KATERINA D CAIRNS  
6126 OAK CLUSTER CIRCLE  
TAMPA FL 33634☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIPST  
ROBERT S CAIRNS  
6126 OAK CLUSTER CIRCLE  
TAMPA FL 33634☐ DeleteTITLE  
NAME  
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CITY - ST - ZIP☐ DeleteTITLE  
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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 filers empowered.

SIGNATURE:

KATERINA CAIRNS

KATERINA CAIRNS

4.30.01

88.890.9103

SIGNATURE AND TYPE OR PRINT NAME OF PERSON OFFICER OR DIRECTOR

Date

Quorum Percent

CAIRNS (12/00)

# 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,

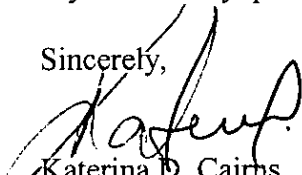
Per our telephone conversation today, we have enclosed the following correspondence between the Florida Department of State and our Certified Public Accountant firm in which the FDS acknowledged receipt of our corporate paper filing and fee.

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**