

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000042848

1. Entity Name

DIGITAL AMENITIES CORPORATION

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90081 040 ***150.00

Principal Place of Business

700 NORTHWEST 57TH PLACE
SUITE #12
FORT LAUDERDALE FL 33309-2042

Mailing Address

700 NORTHWEST 57TH PLACE
SUITE #12
FORT LAUDERDALE FL 33309-2042

2. Principal Place of Business

1911 West Copans Road
Suite, Apt. #, etc.

3. Mailing Address

1911 West Copans Road
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

4. FEI Number

65-1014090

Applied For

Not Applicable

Zip

33064

Country

US

Zip

33064

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZEIHER, WILLIAM A
100 NE 3RD AVENUE
SUITE 280
FT. LAUDERDALE FL 33301

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 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, 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 ☒ Delete
NAME PRESIDENT, DIRECTOR, TREASURER
STREET ADDRESS Brian F. Russell
CITY-ST-ZIP 1900 NW 105 Lane
Coral Springs, FL 33071

TITLE ☒ Delete
NAME VICE PRESIDENT, SECRETARY, DIRECTOR
STREET ADDRESS Doramary H. Russell
CITY-ST-ZIP 1900 NW 105 Lane
Coral Springs, FL 33071

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ 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: Doramary H. Russell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-01 (954) 308-3080

CR2E034 (10/00)