

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 31, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90139 015 \*\*\*150.00

**DOCUMENT # P00000054187**

1. Entity Name  
**TAPE & DISK SERVICES, INC.**



Principal Place of Business  
**138 NW 16 STREET  
BOCA RATON FL 33432**

Mailing Address  
**138 NW 16 STREET  
BOCA RATON FL 33432**

2. Principal Place of Business

3. Mailing Address

**1923 NW 40th Court**  
Suite, Apt. #, etc.

**1923 NW 40th Court**  
Suite, Apt. #, etc.

City & State  
**Pompano Beach, FL**

City & State  
**Pompano Beach, FL**

4. FEI Number **65-1013750**

Applied For

Not Applicable

Zip Country  
**33064 USA**

Zip Country  
**33064 USA**

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

**SPIEGEL & UTRERA, P.A.  
138 NW 16 STREET  
CORAL GABLES FL 33134**

Name  
**Richard Perrine**  
Street Address (P.O. Box Number is Not Acceptable)

**1923 NW 40th Court**  
City **Pompano Beach** **FL** Zip Code **33064**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE   
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **1/27/03**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☐ Delete  
NAME **PERRINE, RICHARD E**  
STREET ADDRESS **138 NW 16 STREET**  
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **PSTD** ☒ Change ☐ Addition  
NAME **Perrine, Richard E**  
STREET ADDRESS **1923 NW 40th Court**  
CITY-ST-ZIP **Pompano Beach, FL 33064**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Richard E Perrine**

**1/27/03**

Date

**954-969-1100**

Daytime Phone #

CR2E034 (10/02)