

02UBR

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

DOCUMENT # **PD1000004195**

1. Entity Name

ValiCheck, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
ValiCheck, Inc.

3. Mailing Address
ValiCheck, Inc.

Suite, Apt. #, etc.
6840 NW 44th Court

Suite, Apt. #, etc.
6840 NW 44th Court

City & State
Lauderhill, FL

City & State
Lauderhill, FL

Zip
33319

Country
USA

Zip
33319

Country
USA

4. FEI Number
65-1067329

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name **David W. Green**

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

6840 NW 44th Court

City **Lauderhill**

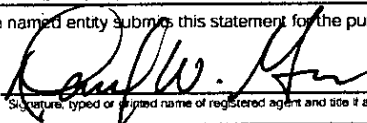
FL

Zip Code
33319

**DO NOT WRITE
IN THIS SPACE**

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



David W. Green, President

11/20/2002

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) ☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY - ST - ZIP

**P - David W. Green
6840 NW 44th Court
Lauderhill, FL 33319**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**V/T - Daniel D. Gudema
320 190th Street
Sunny Isles Beach, FL 33160**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**V/S - David Ralph
2516 Swanson Ave.
Miami, FL 33133**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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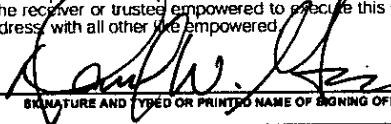
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TITLE
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CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:



David W. Green

11/20/02

954-471-9427

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034B (12/01)