

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90703 022 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # <u>PD10000023078</u>			
1. Entity Name <u>DS Worldwide, Inc</u> ✓			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <u>6901 NW 7th St.</u>		3. Mailing Address <u>6901 NW 7th St</u>	
State, Apt. #, etc. <u>Plantation, FL.</u>		State, Apt. #, etc. <u>Plantation FL</u>	
City, State <u>Plantation, FL.</u>		4. FEI Number <u>65-1080405</u>	
Zip <u>33317</u>	Country <u>USA</u>	Zip <u>33317</u>	Country <u>USA</u>
5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <u>DAVE DOODNAUTH</u>			
Street Address (P.O. Box Number is Not Permitted) <u>6901 NW 7th Street</u>			
City <u>Plantation</u>		FL	Zip Code <u>33317</u>
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 <u>Dave Doodnauth</u>			
9. This corporation is eligible to satisfy its biennial tax filing requirements and elects to do so. (See statute on back) ☐			
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
11. OFFICERS AND DIRECTORS			
NAME STREET ADDRESS CITY-STATE-ZIP	<u>DAVE DOODNAUTH</u> <u>PRESIDENT</u>	NAME STREET ADDRESS CITY-STATE-ZIP	
NAME STREET ADDRESS CITY-STATE-ZIP		NAME STREET ADDRESS CITY-STATE-ZIP	
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NAME STREET ADDRESS CITY-STATE-ZIP		NAME STREET ADDRESS CITY-STATE-ZIP	
DO NOT WRITE 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)(b), Florida Statutes. I further certify that the information reported 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 as an officer or director with an address, without other like empowerment.			
SIGNATURE: <u>Dave Doodnauth</u>			

763529

DO NOT WRITE IN THIS SPACE

C02E0045 (12/01)

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

Attached
P01000023678
763529

DOCUMENT #

1. Entity Name

DS WORLDWIDE, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6901 NW 7th St.

Suite, Apt. #, etc.

3. Mailing Address

6901 NW 7th St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Plantation, FL

Zip
33317

Country
USA

City & State
PLANTATION, FL.

Zip
33317

Country
USA

4. FEI Number
65-1080405

Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DAVE DOODNAUTH

Street Address (P.O. Box Number is Not Acceptable)
6901 N.W. 7th Street

City PLANTATION, FL Zip Code 33317

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 DAVENAND DOODNAUTH (PRESIDENT) Davenand Doodnauth 3/28/02
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	PRESIDENT DAVENAND DOODNAUTH 6901 N.W. 7th Street Plantation, FL 33317
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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 Davenand Doodnauth DAVENAND DOODNAUTH 3/28/02 954.494.0074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)