

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 14, 2002 8:00 am**  
**Secretary of State**

01-14-2002 90021 030 \*\*\*150.00

**DOCUMENT # P01000029291**

1. Entity Name  
**DATANATION TECHNOLOGIES, INC.**

Principal Place of Business

**11660 NW 40 PL  
 SUNRISE FL 33323**

Mailing Address

**11660 NW 40 PL  
 SUNRISE FL 33323**

2. Principal Place of Business

3. Mailing Address

**11331 NW 32nd Mnr**

**11331 NW 32nd Mnr**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Sunrise FL**

City & State

**Sunrise FL**

Zip

**33323**

Country

**USA**

Zip

**33323**

Country

**USA**

4. FEI Number

**65-1091208**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KLOC, RICHARD M  
 11660 NW 40 PL  
 SUNRISE FL 33323**

7. Name and Address of New Registered Agent

Name **MICHAEL J. KLOC**  
 Street Address (P.O. Box Number is Not Acceptable)  
**11331 NW 32nd Mnr**  
 City **Sunrise** **FL** Zip Code **33323**

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

**Richard M. KLOC**

**JAN 5, 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) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 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 **D** ☐ Delete  
 NAME **KLOC, RICHARD M**  
 STREET ADDRESS **11660 NW 40 PL**  
 CITY-ST-ZIP **SUNRISE FL 33323**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CHAIRMAN** ☒ Change ☐ Addition  
 NAME **Richard Kloc**  
 STREET ADDRESS **31400 Hilltop Rd**  
 CITY-ST-ZIP **Golden, CO 80403**

TITLE **President** ☐ Change ☒ Addition  
 NAME **Michael KLOC**  
 STREET ADDRESS **11331 NW 32nd mnr**  
 CITY-ST-ZIP **Sunrise, FL 33323**

TITLE **Treasurer** ☐ Change ☐ Addition  
 NAME **Karen Kloc**  
 STREET ADDRESS **11331 NW 32nd mnr**  
 CITY-ST-ZIP **Sunrise, FL 33323**

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

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

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:

**Richard M. KLOC**

**1/5/02**

**303  
 216-9795**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (9/01)