

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2002 8:00 am
Secretary of State

09-05-2002 90039 032 ***150.00

DOCUMENT # P01000071145

1. Entity Name
SYSTEM DATA RESOURCE.COM, INC.

Principal Place of Business
1000 N HIATUS RD. SUITE 140
PEMBROKE PINES FL 33026

Mailing Address
1000 N HIATUS RD. SUITE 140
PEMBROKE PINES FL 33026



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

650365819

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KULINSKY, ELVA J
1000 N HIATUS RD, SUITE 140
PEMBROKE PINES FL 33026

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. 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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **P KULINSKY, FRED J**
 STREET ADDRESS **1000 N HIATUS RD, SUITE 140**
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

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

TITLE ☐ Delete
 NAME **V KULINSKY, ELVA J**
 STREET ADDRESS **1000 N HIATUS RD, SUITE 140**
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

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

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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
 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:

Elva J. Kulinsky
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)



Attachment

PO 1000071145

SYSTEM DATA RESOURCE.COM, Inc.
1000 N. Hiatus Rd., Suite 140
Pembroke Pines, FL 33026

September, 4 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please be advised that I never received the Uniform Business Report before May 1, 2002 and I'm sending you a check for the initial fee in the amount of \$150.00. Please waive the fee of \$550.00 due to not receiving the annual report prior to this report. I am enclosing copies of this report.

If you have any questions or would like to contact me please feel free to do so at 954 689 4400.

Sincerely,

Elva J. Kulinsky
President