

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

05-05-2003 90379 005 \*\*\*150.00  
P02000012178

01/10/2003 AV

DOCUMENT # P02000012178

1. Entity Name  
DIRECTION WEB HOSTING, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 SEP 15 AM 8:00

Principal Place of Business  
2318 WOODLEAF COURT  
ORLANDO FL 32837

Mailing Address  
2318 WOODLEAF COURT  
ORLANDO FL 32837



2. Principal Place of Business  
2305 Towerbridge st  
Orlando FL

3. Mailing Address  
2305 Towerbridge st  
Orlando FL

☒ CHECK HERE IF MAKING CHANGES *MRS*

City & State  
32837 USA

City & State  
32837 USA

4. FEI Number  
01-0601487

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

MARTINEZ, ANGEL A  
2318 WOODLEAF COURT  
ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name *Angel A Martinez*  
Street Address (P.O. Box Number is Not Acceptable)  
2305 Towerbridge st  
Orlando FL 32837  
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

*Angel A Martinez*  
Signature typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/30/03

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 ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE *P* NAME *Martinez, Angel A.* ☐ Delete  
STREET ADDRESS *2305 Towerbridge st.*  
CITY-ST-ZIP *Orlando, FL 32837*

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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)(f), 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:

*Angel A Martinez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/30/03

CR20034 (10/02)