

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 23, 2007 8:00 am**  
**Secretary of State**

03-23-2007 90019 025 \*\*\*150.00

DOCUMENT # P02000081538

1. Entity Name

DATS OF MARYLAND & VIRGINIA, INC.



Principal Place of Business

5601 POWERLINE RD  
406  
FT LAUDERDALE FL 33309

Mailing Address

5601 POWERLINE RD  
406  
FT LAUDERDALE FL 33309



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

7321 BANNOCKBURN Ridge Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Same

City & State

Bethesda Md. 20817

City & State

Same

Zip

20817

Country

USA

Zip

Same

Country

Same

4. FEI Number

54-2069275

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

SUSSMAN, ROBERT  
20 ISLAND AVE STE 1118  
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

Dr MARVIN Becker

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

7321 BANNOCKBURN Ridge Ct.

City

Bethesda Md

FL

Zip Code

20817

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing

Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME SUSSMAN, ROBERT  
STREET ADDRESS 20 ISLAND AVE STE 1118  
CITY - ST - ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE D  
NAME HAUSDORF, OSCAR DR  
STREET ADDRESS 20 ISLAND AVE STE 1118  
CITY - ST - ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE MARVIN Becker  
NAME MARVIN Becker  
STREET ADDRESS 7321 BANNOCKBURN Ridge Ct  
CITY - ST - ZIP Bethesda Md 20817 ☐ Change ☒ Addition

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

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

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STREET ADDRESS  
CITY - ST - ZIP

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MA. Becker 3/9/07 443 529-4440