


FILED
Aug 01, 2005 8:00 am
Secretary of State

00040418

DOCUMENT # P02000104103		07-05-2005 90117 048 ***150.00	
1. Entity Name D.A.S. COORDINATING SERVICES, INC.			
Principal Place of Business 252 NW 97 AVE. PLANTATION, FL 33324		Mailing Address 252 NW 97 AVE. PLANTATION, FL 33324	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
B. Name and Address of Current Registered Agent SCOTT, DEBORAH 9606 NW 8TH CIRCLE PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 252 NW 97 Avenue City Plantation FL Zip Code 33324	
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] PRESIDENT X 7-2-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP P SCOTT, DEBORAH 252 NW 97 AVE. PLANTATION, FL 33324 <input type="checkbox"/> Delete		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: [Signature] DEBORAH SCOTT X 7-2-05 X 954-292-64 Signature and typed or printed name of signing officer or director		Date Daytime Phone #	

ATTACHMENT

66025278

D.A.S. COORDINATING SERVICES, INC.

252 NW 97 AVENUE
PLANTATION, FL 33324

July 21, 2005

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: P02000104103

Upon receipt of your "Notice of Intent to Dissolve", I followed the instructions by visiting the www.sunbiz.org site to download the preprinted form. I entered my document # and proceeded. The next page showed my corporate information and near the bottom of the form, in red, there is a box to check if I did not receive prior notification. I checked that box because in fact I had NOT received any prior notification. In previous years I had received an actual form in the mail. No such form was received this year. In speaking with people I know that have their own businesses they told me that this year they received a postcard. The only postcard type information I received was the Notice of Intent to Dissolve for which I responded to immediately.

After checking the box indicating non receipt of prior notification, I downloaded the form, completed it and submitted the \$150 due as indicated directly on the form.

As such, I respectfully request that you accept the form and \$150 previously remitted and file my annual report.

Very truly yours,
D.A.S. COORDINATING SERVICES, INC.



Deborah Scott, President



ATTACHMENT
Division of Corporations

66025078

2005 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual
report form.**

This information cannot be changed on the report.	
Document Number	P02000104103
Business Entity Name	D.A.S. COORDINATING SERVICES, INC.
Original File Date	09/26/2002

FEI Number 37-1443577

Principal Address 252 NW 97 AVE.
PLANTATION, FL 33324

Mailing Address 252 NW 97 AVE.
PLANTATION, FL 33324

Registered Agent DEBORAH SCOTT
9606 NW 8TH CIRCLE
PLANTATION, FL 33324 US

Officer/Director Name And Address

P
DEBORAH SCOTT
252 NW 97 AVE.
PLANTATION, FL 33324

☐ **After May 1 of each year, a late charge of \$400.00 is imposed, except in
circumstances in which the entity did not receive prior notice. Please check
this box if notice was not received.**

If all of the above information is correct
and you do not wish to make any
changes, please select:

No Changes

If you need to make changes to
the above information, please
select:

Make Changes