FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P03000084760

1. Entity Name
CDT Enterprises, Inc.

FILED
04 APR 21 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE 04

2. Principal Place of Business	3. Mailing Address
4867 Victoria Chase CT	4867 Victoria Chase CT
Suite Apt # etc	Suite Apt # etc
City & State: Jacksonville FL	City & State: Jacksonville, FL
Zip: 32257 Country: DUVAL	Zip: 32257 Country: DUVAL

4. FEI Number 06 1703376 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Spiegel & Utrera, P.A.

Street Address (P.O. Box Number is Not Acceptable):
1840 Coral Way, 4th Floor

City: Miami FL Zip Code: 33145

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.

600035793766
05/10/04--01020--009 **150.00

SIGNATURE: _____

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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: President, Director NAME: DAN J. THOMAS, JR. STREET ADDRESS: 4867 VICTORIA Chase CT CITY ST ZIP: Jacksonville, FL 32257	TITLE NAME STREET ADDRESS CITY ST ZIP
TITLE: VICE-PRESIDENT, DIRECTOR NAME: CAMMIE J. THOMAS STREET ADDRESS: 4867 VICTORIA Chase CT CITY ST ZIP: JACKSONVILLE, FL 32257	TITLE NAME STREET ADDRESS CITY ST ZIP
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Dan J Thomas Jr. DAN J. THOMAS, Jr. 4-5-04 9043430429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

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