

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # P36665**1. Entity Name
DATACO DEREX, INC.

Principal Place of Business	Mailing Address
3260 N.W. 23 AVENUE	9001 LENEXA DR
SUITE E500	
POMPANO BEACH FL	OVERLAND PARK KS
US	66215 US

2. Principal Place of Business
3260 N.W. 23 AVENUE

3. Mailing Address

Suite, Apt. #, etc.
SUITE E500

Suite, Apt. #, etc.

City & State
POMPANO BEACH FL

City & State

Zip Country
33069 US

Zip Country

4. FEI Number
43-1240813

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent**LANGBEIN LESLIE WESQ.
20801 BISCAYANE BLVD.
#506
AVENTURA FL
33180 USName
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.

SIGNATURE _____ **03/30/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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 VP ☐ Delete
NAME SANDER JEFFREY A.
STREET ADDRESS 9001 LENEXA DRIVE
CITY-ST-ZIP OVERLAND PARK KSTITLE VP ☒ Change ☐ Addition
NAME SANDER JEFFREY A
STREET ADDRESS 9001 LENEXA DRIVE
CITY-ST-ZIP OVERLAND PARK KS 66215TITLE SD ☐ Delete
NAME KRISTL, TIMOTHY O.
STREET ADDRESS 1220 WASHINGTON, 3RD FL
CITY-ST-ZIP KANSAS CITY MOTITLE SD ☒ Change ☐ Addition
NAME KRISTL TIMOTHY O
STREET ADDRESS 1220 WASHINGTON, 3RD FL
CITY-ST-ZIP KANSAS CITY MO 64105TITLE CDP ☐ Delete
NAME PEARLMUTTER, LEE A.
STREET ADDRESS 9001 LENEXA DRIVE
CITY-ST-ZIP OVERLAND PARK KSTITLE CDP ☒ Change ☐ Addition
NAME PEARLMUTTER LEE A
STREET ADDRESS 9001 LENEXA DRIVE
CITY-ST-ZIP OVERLAND PARK KS 66215TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: JEFFREY A. SANDERVP **03/30/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)