**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000012297

1. Corporation Name

VALIDATA NATIONAL, INC.

## FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90091 047 \*\*\*158.75



Principal Place of Business	Mailing Address							
3333 W. COMMERCIAL BLVD STE 113 TT. LAUDERDALE FL 33309	3333 W. COMMERCIAL BLVD STE 113 FT. LAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE					
U\$ 	US		3. Date Incorporated or Qualifed 02/15/1994					
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For				
	26 P.O. BOX 67030	)5	65-0470798	Not Applicable				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	City & State 28 CORAL SPRING	<b>45</b>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip Country		untry U.S	This corporation owes the current year I     Personal Property Tax.	ntangible ☐Yes ☐No				
g. Name and Address of Curr			10. Name and Address of New Registered Agent					
COKER, RICHARD G JR		81 Name						
3303 W. COMMERCIAL BLVD.		82 Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
SUITE 201 FT. LAUDERDALE FL		83						
11. CHODENDALE 1		84 City	F	85 Zip Code				
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the State	502 and 607.1508, Florida Statutes, the a te of Florida. Such change was authorize	bove-named corporatio	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its registered contract as registered				

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able (NOTE: De	distand Adent signature of	equired when reinstating)	DATE		<del></del>		
Oglitade, ypoo o p				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	VSTD	☐ DELETE	1.1 TITLE	DIRECTOR OF OPER	ATIONS	Change	Addition		
NAME	TINTER, RACHELLE		1.2 NAME	D.J. HANNA		-			
STREET ADDRESS	3333 W. COMMERCIAL BLVD, #113		1.3 STREET ADDRESS	3333 W. COMMERCIA	L BUD, #113				
CITY-ST-ZIP	FT. LAUDERDALE FL 33309		1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL	33309				
TITLE	VSTD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition		
NAME	TINTER, RACHELLE		2.2 NAME				,		
STREET ADDRESS	3333 W. COMMERCIAL BLVD, #113	,	2.3 STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP		<u> </u>				
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition		
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CiTY-ST-ZiP	<u> </u>		3.4. CITY-ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition		
NAME			4.2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE	<del></del>	☐ DELETE	5.1 TITLE			☐ Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP	,		5.4 CITY-ST-ZIP		.urs				
TITLE	"	☐ DELETE	6.1 TITLE			Change	☐ Addition		
NAME			6.2 NAME				•		
STREET ADDRESS	•		6.3 STREET ADDRESS						
CITY-ST-ZIP	•		6.4 CITY-ST-ZIP						

14. 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.