2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000012297

VALIDATA NATIONAL, INC.

NAME STREET ADDRESS

FILED Jul 08, 2004 8:00 am Secretary of State 07-08-2004 90188 048 ***158.75

Principal Place of Business 4829 NW 58TH AVE CORAL SPRINGS, FL 33067 US		Mailing Address P.O. BOX 670305 CORAL SPRINGS, FL 3	-		44047503			
2. Principal F	Place of Business	3. Mailing Address	1 MARTIN					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Chg-P	CR2E	034 (10/03)	
City & State		City & State	City & State		er 70798		No	oplied For ot Applicable
Zip —	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			ditional d
	6. Name and Address of Curre	ent Registered Agent		7. Name and	d Address of New Re	egistered	Agent	_
4829 NW	MERDRE J PRES. 58 AVE PRINGS, FL 33067		. Name Street Add	iress (P.O. Box Numb	er is Not Acceptable)		
			City			FL	Zip Cod	8
SIGNATURE	Signature, typed or printed name of registered at	والواحريجون ويعجون وردا المحترجون	TE: Registered Agent signature	The second second	المستعدد المستعدد المستعدد	DATE		· · · · · · · · · · · · · · · · · · ·
	LE NOW!!! FEE IS \$150.00 ue by September 8, 2004	9. Election Campa Trust Fund Cont		\$5.00 May Be Added to Fees	In accordance w corporation did r			
10.	OFFICERS A	ND DIRECTORS	11.	ADDITIONS	/CHANGES TO OFFI	CERS AN	D DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES . HANNA, D.J. 4829 NW 58TH AVE CORAL SPRINGS, FL 33067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Durder J. HANNA DIERDRE J. HANNA	7-1-2004	1 (954)757-9773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

attachnut 44047503

HIPCIC

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 25, 2004

VALIDATA NATIONAL, INC.

P.O. BOX 670305

CORAL SPRINGS, FL 33067 DS

SUBJECT: VALIDATA NATIONAL, INC.

Ref. Number: P94000012297

Upon receipt of your letter and/or check(s) totaling \$108.75, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

The fee to file the enclosed profit annual report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts Document Specialist

Letter Number: 904A00041968