

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000089662

1. Entity Name

BOCA DATABASE SERVICES, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90979 011 ***150.00

Principal Place of Business

751 NE 2ND ST
BOCA RATON FL 33432

Mailing Address

751 NE 2ND ST
BOCA RATON FL 33432

2. Principal Place of Business

6971 West Sunrise Blvd

3. Mailing Address

6971 West Sunrise Blvd

Suite, Apt. #, etc.

Suite 102

Suite, Apt. #, etc.

Suite 102

City & State

Plantation FL

City & State

Plantation FL

Zip

33313

Country

Zip

33313

Country

4. FEI Number

65-0546158

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

HARD, BRUCE W
751 NE 2ND ST
BOCA RATON FL 33432

Name

HARD, BRUCE W

Street Address (P.O. Box Number is Not Acceptable)

6971 West Sunrise Blvd Suite 102

City

Plantation

FL

Zip Code

33313

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

Bruce W. Hard

4-25-2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. 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 State

10. 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 ☐ Delete
NAME D
STREET ADDRESS HARD, BRUCE W
CITY-ST-ZIP 751 NE 2ND ST
BOCA RATON FL 33432

TITLE ☒ Change ☐ Addition
NAME HARD, BRUCE W
STREET ADDRESS 6971 West Sunrise Blvd Suite 102
CITY-ST-ZIP Plantation FL 33432

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ 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:

Bruce W. Hard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-2001

Date

954-791-0711

Daytime Phone #

CR2E034 (10/00)