## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

TITLE

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000041322 (5)

UNIVERSAL DATA RETRIEVERS, INC.

Principal Place of Business Mailing Address									I INDICATE OF ANY AND DIVIDENTIAL PRINTED BY A STATE OF THE PART O				
7403 NORTH STREET RIVERVIW FL 33569				7403 NORTH STREET RIVERVIW FL 33569-4466									
								3.	Date Incorporated or Qualified 05/22/1995		ate of Last R /01/1996	leport	
2. Principal	Place of Business	s	28.	2a. Mailing Address				4.	FEI Number			oplied For	
21		26	26					<b>59-3316867</b> Not Applie			ot Applicable		
Sulte, Ap	t. #, etc.	27	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Sta	ale	1=-1-	City & State				6.	Election Campaign Financing		\$5.00	May Ro		
23		28	28				[ -	Trust Fund Contribution			to Fees		
Zip		Country		Zip	C	ountry	/	8.	This corporation has liability for	intangible	e tax under s	199.032.	
24	25	]	29		30				Florida Statules [	Yes	🔀 No		
	9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
JE	FFRIES, COLE	C. JR.				81	Name						
750 W. LUMSDEN ROAD						82	Stoot Add	dropp (C	P.O. Box Number is Not Accepta	blol			
BRANDON FL 33511						102	SINUS AUC	mess (r	O. Box Number is Not Accepta	נטוטו			
						83	<u> </u>						
						ļ							
						84	City			FL	<b>85</b> Zip (	Code	
11. Pursuan office or agent. I	nt to the provision r registered agent am familiar with,	s of Sections 607.0 I, or both, in the St and accept the ob	502 and 6 ate of Florid ligations of	07.1508, Florida State da Such change was , Section 607.0505, F	ules, the authoriz lorida St	abov ed b alute	e-named cor y the corpora s.	rporatio ation's t	on submits this statement for the board of directors. I hereby acce	OUTDOOD O	d changing it	ts registered registered	
SIGNATURE													
						Registered Agent signature requ				DATE			
12.						13.			ADDITIONS/CHANGES TO OFFIC	JERS AN			
TITLE	D/P/5	CUMOOD		☐ DETEAE		TALE		1/6	73		<b>Change</b>	Addition	
NAME	DONAGHY,					NAME		•					
STREET ADDRESS					1.3	STREET	ADDRESS						
CITY-ST-ZIP	RIVERVIEW	FL 33569		Longra		CITY-S	ST-ZIP					100 (2770)	
TITLE	1			☐ DELEJE	1	TITLE					Change	Addition	
NAME					2.2	NAME	- 1						
STREET ADDRESS	3 ]				23	STREET	ADDRESS						
CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·				ST - ZIP						
TITLE	Į.			☐ DELETE	3.1	TITLE	-				☐ Change	■ Addition	
NAME	1				3.2	NAME							
STREET ADDRESS	<b>5</b>				3.3	STREET	ADDRESS						
CITY-ST-7IP					3.4	CHY-	S1 - 71P						

CITY-ST-ZIP 6.4 C(TY - S1 - Z(P 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Stated of a this conformation indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same local factors of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statedes, and in the appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

61 THLE

62 NAME

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CHY-ST-ZIP

DELETE

DELETE

DELETE

0

91997 P13-141-42

Change

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Change

Addition

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Addition

**FILED** 

Jul 16 1997 8:00am

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Secretary of State