## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P95000064286

Entity Name: DIGITAL AUTHENTICATION TECHNOLOGIES, INC.

Apr 30, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3700 AIRPORT ROAD 8130 GLADES ROAD

SUITE 307 #368

BOCA RATON, FL 33431 US BOCA RATON, FL 33434 US

**Current Mailing Address: New Mailing Address:** 

3700 AIRPORT ROAD PO BOX 811564

BOCA RATON, FL 33481-156 US SUITE 307

BOCA RATON, FL 33431 US

FEI Number: 65-0617160 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HCRM CORP 2200 CORPORATE BLVD., NW SUITE 401 BOCA RATON, FL 33431 US

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:

Date

Electronic Signature of Registered Agent

## Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition DUBE, ROGER R DR Name: Name: DUBE, ROGER R DR Address:

3700 AIRPORT ROAD, SUITE 307 8130 GLADES ROAD, #368 Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33434

Title: Title: () Delete () Change () Addition

Name: MILSTEIN, MARK Name: 4350 RENAISSANCE PKWY STE D Address: Address: WARRENSVILLE HGTS., OH 44128 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

LEVY, JOEL Name: Name: 2101 CORPORATE BLVD, SUITE 317 Address Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition MORGENSTERN, RICHARD L MORGENSTERN, RICHARD L Name: Name: Address: 3700 AIRPORT ROAD, SUITE 317 Address: 8130 GLADES ROAD, #368 City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: DR. ROGER R. DUBE 04/30/2003