

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2002 8:00 am
Secretary of State

08-21-2002 90093 030 ***150.00

DOCUMENT # P95000089821

1. Entity Name
IDEAL COMPUTER SERVICES, INC.

Principal Place of Business

127 FOREST LAKES BLVD
 SUITE 11 & 12
 OLDSMAR FL 34677
 US

Mailing Address

127 FOREST LAKES BLVD
 SUITE 11 & 12
 OLDSMAR FL 34677
 US

2. Principal Place of Business

2055-B N. Dale Mabry Hwy.
 Suite, Apt. #, etc.
B

3. Mailing Address

2055-B N. Dale Mabry Hwy.
 Suite, Apt. #, etc.
B

City & State

Tampa, FL 33607

City & State

Tampa, FL

4. FEI Number

59-3346395

Applied For

Not Applicable

Zip

33607

Country

USA

Zip

33607

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HINES, DONALD B
 10355 LIGHTNER BRIDGE DRIVE
 TAMPA FL 33626

7. Name and Address of New Registered Agent

Name **Christopher C. Lietz**
 Street Address (P.O. Box Number is Not Acceptable)
 2055-B N. Dale Mabry Hwy.
 City **Tampa** FL **33607**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Chris C. Lietz* **President** **8-2-02**
 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE **P** ☒ Delete
 NAME **HINES, DONALD B**
 STREET ADDRESS **127 FOREST LAKES BLVD, SUITE 11**
 CITY-ST-ZIP **OLDSMAR FL 34677**

12. ADDITIONS (CHANGES) TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☒ Addition
 NAME **Christopher C. Lietz**
 STREET ADDRESS **2055-B N. Dale Mabry Hwy.**
 CITY-ST-ZIP **Tampa, FL 33607**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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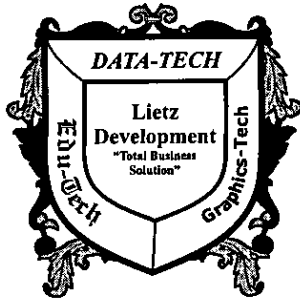
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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: *Christopher C. Lietz*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-2-02 **813-872-8011**
 Date Daytime Phone #

CR2E034 (4/02)

Attachment



Data-Tech

P95000089821
124220

"Data Technologies"

2055-B N Dale Mabry Hwy

Tampa, FL 33607

Phone 813-872-8011 ♦ Fax 813-872-1800

08/19/02

To Whom It May Concern:

We have had a change in address and ownership and did not receive the first UBR filing notice.

Enclosed is our payment for \$150.00 for the renewal report.

Thank you,

Christopher C. Lietz
President