

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000010543

1. Entity Name

DEMOGRAPHIC RESOURCES AND TECHNOLOGIES INC.

FILED

Jan 22, 2001 8:00 am  
Secretary of State

01-22-2001 90123 040 \*\*\*150.00

Principal Place of Business

120 S OLIVE AVE  
#703  
W PALM BEACH FL 33401  
US

Mailing Address

1021-D GREEN PINE BLVD  
W PALM BEACH FL 33409  
US

800611



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

224 DATURA ST

3. Mailing Address

Suite, Apt. #, etc.

# 418

Suite, Apt. #, etc.

City & State

W PALM BEACH FL

City & State

4. FEI Number 65-0637301

Applied For

Not Applicable

Zip 33401

Country USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHEUCHENZUBER, JOHN R  
120 S OLIVE AVE #703  
W PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name SCHEUCHENZUBER, JOHN R

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

224 DATURA ST # 418

City W PALM BEACH

FL

Zip Code

33401

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

*John R Scheuchenzuber*

John R Scheuchenzuber, President

1/11/2001

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

TITLE D  
NAME SCHEUCHENZUBER, JOHN R  
STREET ADDRESS 1021-D GREEN PINE BLVD.  
CITY-ST-ZIP W PALM BEACH FL 33409 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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

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

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:

*John R Scheuchenzuber*

John R Scheuchenzuber, President

Date

Daytime Phone #

(561)

833-7363

CR2E034 (10/00)