

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90156 031 ***150.00

DOCUMENT # P96000057264

1. Entity Name
NEXT DIMENSION TECHNOLOGY, INC.

Principal Place of Business

365 CYPRESS DRIVE
TEQUESTA FL 33469
US

Mailing Address

125 CORTES AVENUE
ROYAL PALM BEACH FL 33411

2. Principal Place of Business

1486 B Skees Road
 Suite, Apt. #, etc.
West Palm Bch FL
 City & State

3. Mailing Address

1486 B Skees Rd
 Suite, Apt. #, etc.
West Palm Bch FL
 City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0682977**

Applied For
☐ **Not Applicable**

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIMAS, NANCY
125 CORTES AVENUE
ROYAL PALM BEACH FL 33411-1301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 *Nancy Dimas VP*
 Signature, typed or printed name of registered agent and title if applicable.

NANCY DIMAS
 (NOTE: Registered Agent signature required when reinstating)

1/24/02
 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, 2002 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	P. SLAIGHT, PAUL	125 CORTES AVENUE	ROYAL PALM BEACH FL 33411-1301	<input type="checkbox"/>
	S. DIMAS, NANCY	125 CORTES AVENUE	ROYAL PALM BEACH FL 33411-1301	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Nancy Dimas*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(561) 712-4160
 Daytime Phone #

CR2E034 (9/01)