

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90162 001 ***158.75

DOCUMENT # P96000082122

1. Entity Name
ENTREPORT CORPORATION

Principal Place of Business

2790 BUSINESS PARK DRIVE
 SUITE B
 VISTA CA 92083

Mailing Address

2790 BUSINESS PARK DRIVE
 SUITE B
 VISTA CA 92083

2. Principal Place of Business

5937 Darwin Ct

Suite, Apt. #, etc.

Suite #109

City & State

Carlsbad CA

Zip

92008

Country

USA

3. Mailing Address

5937 Darwin Ct

Suite, Apt. #, etc.

Suite #109

City & State

Carlsbad CA

Zip

92008

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0703923

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301

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

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, 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 CD ☐ Delete
NAME D'ARCANGELO, DAVID J
STREET ADDRESS 2790 BUSINESS PARK DR, SUITE B
CITY-ST-ZIP VISTA CA 92083

TITLE DPTS ☐ Delete
NAME SHUE, WILLIAM A
STREET ADDRESS 2790 BUSINESS PARK DR., SUITE B
CITY-ST-ZIP VISTA CA 92083

TITLE D ☐ Delete
NAME ACONE, TONY
STREET ADDRESS 2790 BUSINESS PARK DR., SUITE B
CITY-ST-ZIP VISTA CA 92083

TITLE D ☐ Delete
NAME LUCAS, SCOTT G
STREET ADDRESS 2790 BUSINESS PARK DR., SUITE B
CITY-ST-ZIP VISTA CA 92083

TITLE D ☒ Delete
NAME SIMONE, JOHN A
STREET ADDRESS 2790 BUSINESS PARK DR., SUITE B
CITY-ST-ZIP VISTA CA 92083

TITLE CS ☐ Delete
NAME RIES, DEBORAH A
STREET ADDRESS 2790 BUSINESS PARK DR., SUITE B
CITY-ST-ZIP VISTA CA 92083

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Chairman of Board ☒ Change ☐ Addition
NAME
STREET ADDRESS 5937 Darwin Ct, Suite # 109
CITY-ST-ZIP Carlsbad CA 92008

TITLE DPT ☒ Change ☐ Addition
NAME
STREET ADDRESS 5937 Darwin Ct, Suite #109
CITY-ST-ZIP Carlsbad CA 92008

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5937 Darwin Ct, Suite 109
CITY-ST-ZIP Carlsbad CA 92008

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5937 Darwin Ct, Suite 109
CITY-ST-ZIP Carlsbad CA, Suite 109 92008

TITLE D ☒ Change ☒ Addition
NAME Bruce Peterson
STREET ADDRESS 5937 Darwin Ct, Suite 109
CITY-ST-ZIP Carlsbad CA 92008

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 5937 Darwin Ct, Suite 109
CITY-ST-ZIP Carlsbad CA 92008

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/02 760-688-1144X105

Date

Daytime Phone #

CR2E034 (9/01)