Davtime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED

INTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Apr 17, 2001 8:00 am Secretary of State DOCUMENT # **P96000089398** 1. Entity Name DIVERSIFIED CORRECTIONAL SERVICES, INCORPORATED 4-17-2001 90029 037 \*\*\*150 00 Principal Place of Business Mailing Address 4200 WACKENHUT DRIVE 4200 WACKENHUT DRIVE SUITE 100 SUITE 100 PALM BEACH GARDENS FL 33410-4243 PALM BEACH GARDENS FL 33410-4243 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0709333 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namé FINIZIA, F. E. Street Address (P.O. Box Number is Not Acceptable) % THE WACKENHUT CORPORATION 4200 WACKENHUT DR., #100 PALM BEACH GARDENS FL 33410-4243 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE D ☐ Delete TITLE Change Addition NAME NAME WACKENHUT, GEORGE R STREET ADDRESS STREET ADDRESS 279 BERMUDA BAY LANE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Delete Change Addition TITLE TITLE NAME WACKENHUT, RICHARD R NAME 4200 WACKENHUT DRIVE STREET ADDRESS STREET ADDRESS 135 SOUTH RIVER ROAD CITY-ST-ZIP CITY-ST-ZIP STUART FL 34996-6311 ☐ Change Delete ☐ Addition TITLE TITLE NAME BERNSTEIN, ALAN B NAME STREET ADDRESS STREET ADDRESS 4652 S.W. BRANCH TERRACE CITY-ST-ZIP CITY-ST-ZIP PALM\_CITY\_FL 34990 ☐ Change ☐ Addition TITLE □ Delete TITLE NAME GREEN, IAN A NAME STREET ADDRESS STREET ADDRESS 15888 118TH TERRACE CITY-\$T-7IP CITY-ST-ZIP JUPITER FL 33478 TITLE ☐ Defete TITLE ☐ Change Addition NAME MIYAR, JUAN D NAME STREET ADDRESS STREET ADDRESS 19121 N.W. 89TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33015** TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP CITY-ST-ZIP 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.