

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State
 04-11-2001 90125 036 ***150.00

0305596

DOCUMENT # P97000012550

1. Entity Name
ECWERKS, INC.

Principal Place of Business
**100 SOUTH MISSOURI AVENUE
 CLEARWATER FL 33756
 US**

Mailing Address
**100 SOUTH MISSOURI AVENUE
 CLEARWATER FL 33756
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3433347**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**


6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATEL, DILIP
 IMRGLOBAL CORP.
 26750 US HWY 19 N., STE 500
 CLEARWATER FL 33761**

Name
IMRglobal Corp.
 Street Address (P.O. Box Number is Not Acceptable)
Attn: General Counsel
100 South Missouri Ave.
 City
Clearwater, FL Zip Code
33756

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  **IMRglobal Corp.**
 by **DILIP PATEL VP & SEC.**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/6/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **SANAN, SATISH K**
 STREET ADDRESS **26750 U.S. HIGHWAY 19 NORTH, STE 500**
 CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE ☒ Change ☐ Addition
 NAME **100 South Missouri Ave.**
 STREET ADDRESS **Clearwater, FL 33756**
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **ADDONISIO, VINCENT**
 STREET ADDRESS **26750 U.S. HIGHWAY 19 NORTH, STE 500**
 CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE **DP** ☒ Change ☐ Addition
 NAME **100 South Missouri Ave.**
 STREET ADDRESS **Clearwater, FL 33756**
 CITY-ST-ZIP

TITLE **PD** ☒ Delete
 NAME **POLLARD, JAMES T**
 STREET ADDRESS **100 N TAMPA ST #3600**
 CITY-ST-ZIP **TAMPA FL 33602**

TITLE **S** ☐ Change ☒ Addition
 NAME **Patel, Dilip**
 STREET ADDRESS **100 South Missouri Ave.**
 CITY-ST-ZIP **Clearwater, FL 33756**

TITLE **D** ☒ Delete
 NAME **HINDMAN, JOHN R**
 STREET ADDRESS **26750 U.S. HIGHWAY 19 NORTH, STE 500**
 CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE **CFO** ☐ Change ☒ Addition
 NAME **Dean, Michael J**
 STREET ADDRESS **100 South Missouri Ave.**
 CITY-ST-ZIP **Clearwater, FL 33756**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

SIGNATURE:  **IMRGLOBAL CORP**
 by **DILIP PATEL VP, Gen Sec**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01

Date

7274678000

Daytime Phone #

CR2E034 (10/00)