

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 03, 2002 8:00 am
Secretary of State

10-03-2002 90051 033 ***550.00

DOCUMENT # P97000054104

1. Entity Name

LPS ACQUISITION CORP.

Principal Place of Business

10570 HAGEN RANCH RD
 BOYNTON BCH FL 33437

Mailing Address

10570 HAGEN RANCH RD
 BOYNTON BCH FL 33437

2. Principal Place of Business

5800 KROME AVE

Suite, Apt. #, etc.

703

City & State

MIAMI FL

Zip

33193

Country

USA

3. Mailing Address

5800 KROME AVE

Suite, Apt. #, etc.

703

City & State

MIAMI FL

Zip

33193

Country

USA

4. FEI Number

65-0769589

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CLAIRE, ROBERT I

7280 W. PALMETTO PK RD

STE 106

BOCA RATON FL 33486

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 DECKINGER, ERIC W
 STREET ADDRESS 7280 W. PALMETTO PK RD- STE 106
 CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE ~~T~~
 NAME ~~HALT, TIMOTHY~~
 STREET ADDRESS ~~901 NW 116TH TERRACE~~
 CITY-ST-ZIP ~~PLANTATION FL 33325~~ ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/02

Date

Daytime Phone #

CR2E034 (4/02)