

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 05, 2001 8:00 am**
Secretary of State

05-05-2001 90835 038 ***150.00

DOCUMENT # P97000087857

1. Entity Name

SAVVYDATA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**3201 W. COMMERCIAL BLVD., STE 118
FT LAUDERDALE FL 33309****3201 W. COMMERCIAL BLVD., STE 118
FT LAUDERDALE FL 33309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0787514**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**KLEIN, JEFFREY G
23123 STATE ROAD SEVEN
SUITE 350-B
BOCA RATON FL 33428**

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, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P				VP		
	NEVINS, MICHEAL				Michael Dreiblatt		
	3201 W. COMMERCIAL BLVD., STE 118				3201 W. Commercial Blvd, Ste 118		
	FT LAUDERDALE FL 33309				Ft Lauderdale, FL 33309		
	STD				VP		
	KADYMR, JACK				Gabriel Goldfine		
	3201 W. COMMERCIAL BLVD., STE 118				3201 W. Commercial Blvd. Ste 118		
	FT LAUDERDALE FL 33309				Ft Lauderdale, FL 33309		

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

Date

Daytime Phone #

4-25-01

CR2E034 (10/00)