

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90229 044 ***550.00

DOCUMENT # P97000098199

1. Entity Name
SUBSTRATE, INC.

Principal Place of Business
523 HALIFAX AVENUE
DAYTONA BEACH FL 32118

Mailing Address
523 HALIFAX AVENUE
DAYTONA BEACH FL 32118



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
501 No. Grandview Ave.
 Suite, Apt. #, etc.

3. Mailing Address
501 No. Grandview Ave.
 Suite, Apt. #, etc.

Third Floor
 City & State
Daytona Beach, FL

Third Floor
 City & State
Daytona Beach, FL

4. FEI Number **59-3536625**

Applied For
 Not Applicable

Zip
32118

Country
USA

Zip
32118

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DOUGLAS A DANIELS
523 HALIFAX AVENUE
DAYTONA BEACH FL 32118

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
501 No. Grandview Ave.
Third Floor
 City **Daytona Beach, FL** Zip Code **32118**

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 Douglas A. Daniels
 Signature, typed or printed name of registered agent and title if applicable.

7-25-02
 (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 **PD** ☐ Delete
 NAME **DANIELS, DOUGLAS A**
 STREET ADDRESS **523 HALIFAX AVENUE**
 CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **501 No. Grandview Avenue, 3rd Floor**
 CITY-ST-ZIP **Daytona Beach, FL 32118**

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

TITLE ☐ Change ☐ Addition
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 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:

SIGNATURE OF REGISTERED AGENT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douglas A. Daniels

7-25-02

(386) 255-8118

Date

Daytime Phone #

CR2E034 (4/02)