2001 UNIFORM BUSINESS REPORT (UBR)

Mar 26, 2001 8:00 am DOCUMENT # P98000014682 **Secretary of State** 1. Entity Name WYCK DATA CORP 03-26-2001 90046 028 ***150.00 Principal Place of Business Mailing Address 3341 WEST HILLSBORO BLVD. STE D 3341 WEST HILLSBORO BLVD. STE D DEERFIELD BEACH FL 33422 DEERFIELD BEACH FL 33422 U + U V & U 2. Principal Place of Business 3. Mailing Address 3840 W. HILLSBOW BLVD Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 201 Applied For City & State City & State 4. FEi Number 11-2640577 BENCH DEERFIELD Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired BROWARD Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZELINICA, -120BE921 ZELINKA, ROBERT Street Address (P.O. Box Number is Not Acceptable) **7612 MARBELLA TERRACE BOCA RATON FL 33433** 15919 LAWRER CREEK DR Zip Code 334Y6 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. Pusable. (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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete Change ☐ Addition TITLE TITLE **BLANK, HERMAN** NAME NAME 7202 PROMENADE DR. #501 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 32433** ☐ Delete TITLE TITLE ZELINIKA, RONA NAME NAME ZELINKA 15919 LANNER CREEK STREET ADDRESS STREET ADDRESS 7612 MARBELLA TERRACE CITY-ST-ZIP CITY-ST-7IP BOCA RATON FL 33433 DELPAY DEACH FL Change Addition TITLE . Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITI F ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

HERMAN BLANK-PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR