

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90146 016 ***150.00

DOCUMENT # P98000018534
1. Entity Name

DAG Investments, Inc.

DO NOT WRITE IN THIS SPACE

B0057286

2. Principal Place of Business 700 Universe Boulevard Suite, Apt. #, etc. Attn: Dennis P. Coyle	3. Mailing Address 700 Universe Boulevard Suite, Apt. #, etc. Attn: Dennis P. Coyle
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DO NOT WRITE IN THIS SPACE

City & State Juno Beach, FL	City & State Juno Beach, FL	4. FEI Number Not Applicable	Applied For Not Applicable
Zip 33408	Country USA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name J. E. Leon
Street Address (P.O. Box Number is Not Acceptable) 9250 West Flagler Street
City Miami
State FL
Zip Code 33174

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 Schultz, Alexander	TITLE	
STREET ADDRESS 700 Universe Boulevard		STREET ADDRESS	
CITY-ST-ZIP Juno Beach, FL 33408		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Alexander Schultz

Alexander

Schultz

03/11/02

(561) 694-3424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)