

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2001 8:00 am
Secretary of State

02-14-2001 90006 050 ***150.00

DOCUMENT # P98000042444

1. Entity Name

DMC DEVELOPMENT, INC.

Principal Place of Business

2830 NE 29 AVE
LIGHTHOUSE POINT FL 33064
US

Mailing Address

404 E ATLANTIC BLVD STE 101
POMPANO BEACH FL 33060

2. Principal Place of Business

2831 Marina Circle

3. Mailing Address

Suite, Apt. #, etc.

City & State

Lighthouse Point, FL

City & State

4. FEI Number 65-0840183

Applied For

Not Applicable

Zip

33064

Country

USA

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

ROSENTHAL, STUART S
404 E ATLANTIC BLVD STE 101
POMPANO BEACH FL 33060

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 D ☐ Delete
NAME EDWARDS, DEBORAH A
STREET ADDRESS 4040 NE 30 AVE
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☒ Change ☐ Addition
NAME Edwards, Deborah A
STREET ADDRESS 2865 Marina Circle
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE D ☐ Delete
NAME CANADA, MAUREEN L
STREET ADDRESS 2830 NE 29 AVE
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☒ Change ☐ Addition
NAME CANADA, Maureen L
STREET ADDRESS 2521 NE 31 COURT
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE D ☐ Delete
NAME SPIEKER, CHRISTIAN D
STREET ADDRESS 2830 NE 29 AVE
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☒ Change ☐ Addition
NAME Spicker, CHRISTIAN D.
STREET ADDRESS 2831 Marina Circle
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

2/1/01 (954) 941 0227

0122539

CR2E034 (10/00)