Applied For

\$8.75 Additional

Zio Code

Not Applicable

2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 26, 2001 8:00 am DOCUMENT # P99000000601 **Secretary of State** 1. Entity Name DANTZLER COMPUTER CONSULTING, INC. 03-26-2001 90081 026 ***150.00 Principal Place of Business Mailing Address 8787 SOUTHSIDE BOULEVARD 8787 SOUTHSIDE BOULEVARD #3914 #3914 JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 2. Principal Place of Business 3. Mailing Address 2090 BRANDON LAKE DR. 12090 BRANDON LAKE DR. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3550347 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		Trust Fund Contribution.		Added to Fees	
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DANTZLER, DERRICK 8787 SOUTHSIDE BLVD #3914 JACKSONVILLE FL 32256	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12090 8	LER, DERRICK SRANDON LAKE DR. SONUILLE, FL 322	M Change	☐ Addition
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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 interfere every 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 affactment with an address. With 3th other like empowered changed, or on an at

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FICER OR DIRECTOR