

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90244 031 ***158.75

DOCUMENT # P99000087585

1. Entity Name

DIRECT MARKETING SOLUTIONS, INC.

Principal Place of Business

**2219 SW. 59TH TERRACE
 HOLLYWOOD FL 33023**

Mailing Address

**5831 NW 37TH AVE
 COCONUT CREEK FL 33073**

2. Principal Place of Business

128 N.W. 25th

3. Mailing Address

Suite, Apt. #, etc.

Terrace

City & State

FORT LAUDERDALE, FL.

Zip

33315

Country

USA

City & State

Fort Lauderdale, FL.

Zip

33315

Country

USA

4. FEI Number

65-0956656

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JAFARIEH, VAHID

5831 N.W. 37TH AVE.

COCONUT CREEK FL 33073

7. Name and Address of New Registered Agent

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)

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**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PTD
 JAFARIEH, VAHID
 5831 NORTHWEST 37TH AVENUE
 COCONUT CREEK FL 33073** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SD
 JAFARIEH, CHRISTINE M
 5831 NORTHWEST 37TH AVENUE
 COCONUT CREEK FL 33073** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

JAFARIEH, VAHID

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/22/02

Date

Daytime Phone #

(954) 327-2027

CR2E034 (9/01)