

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003 8:00 am
Secretary of State

08-04-2003 90156 045 ***550.00

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1. Entity Name
DATA-SHOP, INC.



Principal Place of Business
100 S BISCAYNE BLVD #900
MIAMI FL 33131

Mailing Address
100 S BISCAYNE BLVD #900
MIAMI FL 33131



2. Principal Place of Business
22 Harbor Point
Suite, Apt. #, etc.

3. Mailing Address
22 Harbor Point
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Key Biscayne, FL
Zip
33149
Country
USA

City & State
Key Biscayne, FL
Zip
33149
Country
USA

4. FEI Number 65-0976131

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBLES, LOUIS S
100 S BISCAYNE BLVD #900
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name LOUIS S. ROBLES
Street Address (P.O. Box Number is Not Acceptable)
22 Harbor Point
Key Biscayne, FL
City KEY BISCAYNE FL Zip Code 33149

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME ROBLES, LOUIS S
STREET ADDRESS 100 S BISCAYNE BLVD #900
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME LOUIS S. ROBLES
STREET ADDRESS 22 Harbor Point
CITY-ST-ZIP KEY BISCAYNE, FL. 33149 ☒ Change ☐ Addition

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

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] LOUIS S. ROBLES, DIRECTOR 7/29/03 305-361-100

CR2E034 (4/03)