

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

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90140 012 ***150.00

DOCUMENT # S22996

1. Entity Name **DNRS INC.**
901 DONALD ROSS ROAD
JUPITER BEACH, FLA 33408

000109

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2532 W. Indian town Rd.

Suite, Apt. #, etc.

SUITE A-4

City & State

Jupiter, FL -

Zip

33458-3935

Country

USA

3. Mailing Address

2532 W. Indian town Rd.

Suite, Apt. #, etc.

SUITE A-4

City & State

Jupiter, FL -

Zip

33458-3935

Country

USA

4. FEI Number

65-0236979

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

NICHOLAS Sheffer

Street Address (P.O. Box Number is Not Acceptable)

2532 W. Indian town Rd

SUITE A4

City

Jupiter

FL

Zip Code

33458

3935

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

Nicholas R. Sheffer

Nicholas R. Sheffer 04/21/02

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	President
NAME	NICHOLAS R. Sheffer
STREET ADDRESS	2532 W. Indian town Rd
CITY - ST - ZIP	JUPITER, FLA 33458
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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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

Nicholas R. Sheffer

NICHOLAS

04/21/02

DATE

561-744-6747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Telephone #

CR2E034B (12/01)