## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # \$23976**

1. Entity Name

Zip

SIGNATURE

DOUGLASS DATA SYSTEMS, INC.

Country

DOUGLASS, DONNA

STE #340

1903 S CONGRESS AVE

**BOYNTON BEACH FL 33426** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

6. Name and Address of Current Registered Agent

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

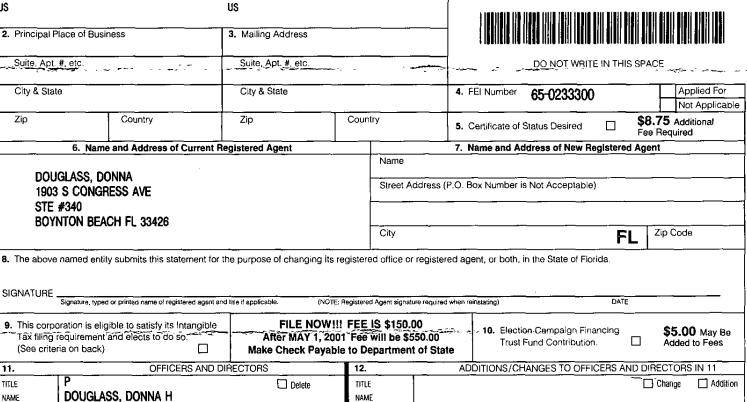
Principal Place of Business Mailing Address 1903 S CONGRESS AVE 1903 S CONGRESS AVE STE #340 STE #340 **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

## Mar 22, 2001 8:00 am **Secretary of State**

03-22-2001 90064 004 \*\*\*150.00

BUULLUUI



(See criteria on back)		Make Check Payable to Department of State		ie		_ //4000			
11.	OFFICERS AND DIRECTORS			12.	ADDITIONS/CHANGES	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-2IP	P DOUGLASS, DONNA H 4628 BLUE PINE CIRCLE LAKE WORTH FL		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOUGLASS, DONNA H 4628 BLUE PINE CIRCLE LAKE WORTH FL		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	10		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

City

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 regeriter 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: