

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V01938

1. Entity Name

DIGITAL MACHINE CORPORATION, S.F.

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90036 039 ***150.00

Principal Place of Business

Mailing Address

425 38TH SQ. S.W.
PO BOX 3714
VERO BCH FL 32968
US

425 38TH SQUARE S.W.
P.O. BOX 3714 (32964)
VERO BEACH FL 32968-3940

2. Principal Place of Business

294 OLD DIXIE HWY

3. Mailing Address

294 OLD DIXIE HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VERO BEACH, FLORIDA

City & State

VERO BEACH, FLORIDA

Zip

32962

Country

INDIAN RIVER

Zip

32962

Country

INDIAN RIVER

4. FEI Number

65-0303517

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IRBY, KEVIN N.
425 38TH SQUARE SW
VERO BEACH FL 32968

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **IRBY, KEVIN M.**
STREET ADDRESS **425 38TH SQUARE SW**
CITY-ST-ZIP **VERO BEACH FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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: *Kevin M. Irby*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)