

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

**Apr 23, 2001 8:00 am
Secretary of State**

04-23-2001 90104 049 ***150.00

DOCUMENT # P00000027361

1. Entity Name
DIGICAD INC

Principal Place of Business

**10918 NW 70 STREET
MIAMI FL 33178**

Mailing Address

**10918 NW 70 STREET
MIAMI FL 33178**

2. Principal Place of Business

6930 NW 46 street

3. Mailing Address

6930 NW 46 street.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida.

4. FEI Number

EIN 65-1014828

Applied For

Not Applicable

Zip

33166

Country

U.S.A.

Zip

33166

Country

U.S.A.

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

**ZULUAGA, CARLOS M
10918 NW 70 STREET
MIAMI FL 33178**

Name **ZULUAGA, CARLOS M.**

Street Address (P.O. Box Number is Not Acceptable)
6930 NW 46 street.

City **Miami**

FL

Zip Code **33166**

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 **CARLOS M. ZULUAGA**

4/16/01

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, 2001 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

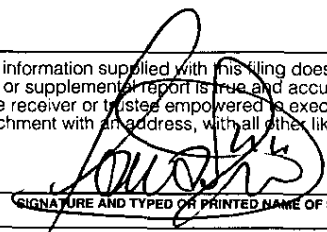
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	ZULUAGA, CARLOS M	10918 NW 70 STREET	MIAMI FL 33178	<input type="checkbox"/>
D	CORREA, ANA B	10918 NW 70 STREET	MIAMI FL 33178	<input type="checkbox"/>
D	ESTRADA, ISABEL C	10918 NW 70 STREET	MIAMI FL 33178	<input type="checkbox"/>
D	GARCIA, NATALIA C	10918 NW 70 STREET	MIAMI FL 33178	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D	ZULUAGA, CARLOS M.	6930 NW 46 STREET.	MIAMI, FL. 33166	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	CORREA, ANA B.	6930 NW 46 STREET	MIAMI, FL. 33166	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	ESTRADA, ISABEL C.	6930 NW 46 STREET	MIAMI, FL. 33166	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	CORREA, G NATALIA	6930 NW 46 STREET	MIAMI, FL. 33166	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:



CARLOS M. ZULUAGA.

4/16/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)