FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000034003 (0) **DOCUMENT #** 1. Corporation Name

DIOTER LAND ENGINEEDING CODD

DIGITAL	LINK ENGINEERING CO	IF:							
Principal Place o	of Business	Mailing Address			f låtiketi tin lålåt billt aqiti nott	# \$114 28148 1	met Plaif BBH1 61	5:45 till 1981	
7118 NW 72ND AVENUE 7118 NW 72ND AVENU MIAMI FL 33166 MIAMI FL 33166			UE						
					3. Date Incorporated or Qualified 05/02/1995	3a. Dat	te of Last Rep		
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number			oplied For	
26		26			(SEE APPLICATION	ATTACHEO Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	├		5. Certificate of Status Desired				
City & State		City & State	 ' ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country		8. This corporation has liability for		tax under s 1	99.032,	
4	25	29	30			X No	Acont		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New I	registered	Agent		
				Name					
SARRAFF	F, CARLOS M		82	Street Addr	ess (P.O. Box Number is Not Accepta	ole)			
	72ND AVENUE								
MIAMI FL 33166			83						
			84	City		F	85 Zip	Code	
•					ration submits this statement for the part of directors. Thereby accept the app			nistered offic	
	Signature, typed or printed name of registered age	nt and title of applicable (N:	OTE: Registered Agent s	ignatura require	d which restratory ADDITIONS/CHANGES TO OF	DATE FICERS AN	ND DIRECTOF	RS IN 12	
12.	PTD	DELETE	1 1 TITLE				Change	☐ Addition	
TITLE	GANDULFO, ANIBAL J		1.2 NAME						
NAME STREET ADDRESS	7118 NW 72ND AVENUE		1.3 STREET A	DORESS	•				
CITY-ST-ZIP	MIAMI FL 33166		1,4 CHTY - ST -	ZIP					
TITLE	VSD	DELETE	2 1 TITLE				Change	Addition	
NAME	SARRAFF, CARLOS M		22 NAME						
STREET ADDRESS	7118 NW 72ND AVENUE		2 3 STREET A	DORESS					
CITY-ST-ZIP	MIAMI FL 33166		2.4 CITY - ST -	· ZIP			Change	[] Addition	
TITLE		☐ DELÉTÉ	3 1 TITLE	.			Change	L_ Addition	
NAME			3.2 NAME						
STREET ADDRESS	**		3.3. STREET A						
CITY-ST-ZIP		□ DELETÉ	3.4 CITY - \$T-	-ZIP			Change	Addition	
TITLE		☐ DELETÉ	4. 1 TITLE 4.2 NAME					_	
NAME			4.2 NAME 4.3 STREET A	nngese					
STREET ADDRESS			4.3 SIREEL A						
CITY-ST-ZIP		DELETE	5 1 TiTLE	- 711			Change	Addition	
TITLE			5.2 NAME						
NAME CORECT ADDRESS			5.3 STREET A	ADDRESS					
STREET ADDRESS			5.4 CITY - ST	1	<u></u>				
CITY-ST-ZIP TITLE		☐ DELETE	6. 1 TITLE .		2000017 -03/21/9601	531	Emange Common	Addition	
NAME			6.2 NAME		-03/21/9601	U83	UU6		
STREET ADDRESS			6.3 STREET A	ADDRESS	***200.00				
		h	6.4 CITY - S1	. · ZIP					
14. I do hereb certify that oath; that appears in	by certify that the information supplied the information indicated on the state of the information indicated on the state of the state	d with this filing is voluntarily furnial report or supplemental are poration of the Meetiver or trustry on an attachment with an ac	rnished and does naual report is true stee empowered to ddress.	not qualify and accur execute the	for the exemption stated in Section 1' hate and that my signature shall have this report as required by Chapter 607,	9.07(3) k), ne same le Florida Sta	Florida Statut gal effect as if itutes; and tha	es. I further made unde at my name	

SIGNATURE:

SIGNAT