


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91221 024 ***150.00

DOCUMENT # P97000048776
1. Entity Name
DIGITALREACH HOLDINGS, INC.



Principal Place of Business
11845 W. OLYMPIC BLVD.
SUITE 1140
LOS ANGELES CA 90064

Mailing Address
11845 W. OLYMPIC BLVD.
SUITE 1140
LOS ANGELES CA 90064

11005627



2. Principal Place of Business
15643 SHERMAN WAY
Suite, Apt. #, etc.
SUITE 240

3. Mailing Address
15643 SHERMAN WAY
Suite, Apt. #, etc.
SUITE 240

CHECK HERE IF MAKING CHANGES

City & State
VAN NUYS, CA

City & State
VAN NUYS, CA

Zip
91406 Country
U.S.A.

Zip
91406 Country
U.S.A.

4. FEI Number **52-2262373** Applied For
 Not Applicable

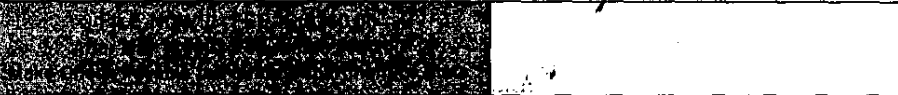
5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____



9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
NAME **ALBORNOZ, CHRIS**
STREET ADDRESS **11845 W. OLYMPIC BLVD., STE. 1140**
CITY-ST-ZIP **LOS ANGELES CA 90064**

TITLE Change Addition
NAME
STREET ADDRESS **15643 Sherman Way, Suite 240**
CITY-ST-ZIP **Van Nuys, CA 91406**

TITLE **S** Delete
NAME **RAYO, ROY**
STREET ADDRESS **11845 W. OLYMPIC BLVD., STE. 1140**
CITY-ST-ZIP **LOS ANGELES CA 90064**

TITLE Change Addition
NAME
STREET ADDRESS **15643 Sherman Way, Suite 240**
CITY-ST-ZIP **Van Nuys, CA 91406**

TITLE **TD** Delete
NAME **QUIAMBAO, ALBERT**
STREET ADDRESS **11845 W. OLYMPIC BLVD., STE. 1140**
CITY-ST-ZIP **LOS ANGELES CA 90064**

TITLE Change Addition
NAME
STREET ADDRESS **15643 Sherman Way, Suite 240**
CITY-ST-ZIP **Van Nuys, CA 91406**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROY RAYO **ROY RAYO** **04/01/03** **(818) 904-0115**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)