FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT	#	F40202)
1 Compretion Name			,

Corporation Name

MAIN DIGITAL, INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90272 024 ***150.00



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Principal Place	e of Business		Ma	ailing Address				1 1981389 1111 81811 88110 11811 8		A11 81811 P181	
3111 CARDINAL DRIVE 3111 CARDINAL DRIVE											
VERO BEACH FL 32963 VERO BEACH FL 32963					DO NOT WRITE IN THIS SPACE						
								3. Date Incorporated or Qualifed		31 AGE	
								06/10/1981			ł
2. Principal Pi	lace of Rusin	966	28	Mailing Address				4. FEI Number	_		Applied For
— ·	Idoo of Doon!		26	maning / to a coo				65-0048073			Not Applicable
Suite, Apt.	#. etc.	<u> </u>		Suite, Apt. #, etc.							Additional
22	.,		27					5. Certifcate of Status Desired			Required
City & State	تترجسنت و	والمستحدث		City & State			المستشيدة	6. Election Campaign Financing		\$5.0	0 May Be
23		•	28					Trust Fund Contribution		Added	d to Fees
Zip		Country		Zip	Coul	ntry		8. This corporation owes the cur	rent year inta	ingible	
24		25	29		30			Personal Property Tax.	_	☐ Yes	TXN0
	9. Name	and Address of Cu	rrent Regis	tered Agent				10. Name and Address of New	Registered A	tgent	
0111	AIDE MOU	A.C.)				81	Name				
	AIRE, MICH				}	82	Street Addre	ess (P.O. Box Number is Not Accept	able)		
	I CARDINAL				Ì	_			_		
3296	O BEACH, I	FLORIDA	-		\ \ \	83					\
3230	טע				l	84	City			85 Zir	o Code
									FL		to registered
11. Pursuant	to the provisi egistered ago	ons of Sections 607. ent. or ooth, in the St	0502 and 60 ate of Florid	07.1508, Florida Statute la. Such change was at	es, the at uthorized	by t	e-named corpo the corporation	oration submits this statement for the n's board of directors. I hereby acce	purpose or o	itment as	registered
agent. I a	m amilial wit	and accept the ob	ligations of,	Section 607.0505, Flor	ida Statu	ites.		·			
SIGNATURE		4500							DATE		
12.	Signature, typed		AND DIRE		Registered 13.	Agen	t signature required	ADDITIONS/CHANGES TO OF	<u>`</u>	D DIRECT	ORS IN 12
TITLE	ST	OFFICERS	AND DIVE	DELETE	1,1 111	LE	<u> </u>	ADDITIONAL TO CO.		Change	
NAME	MAYS, PA	TRICIA A		_	1.2 NA		1				_
STREET ADDRESS	8386-75TH						ADDRESS				
CITY-ST-ZIP	l .	H, FL 00000			1.4 CII						}
TITLE	DP	11, 1 6 00000		DELETE	2,1 TIT					☐ Change	e
NAME	O'HAIRE,	MICHAFI			2.2 NA	ME					ĺ
STREET ADDRESS	3111 CAF						ADDRESS				}
CITY-ST-ZIP		H, FL 00000			2. 4 CT		- 1				ŀ
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NAME		E. MICHAEL			3.2 NA	ME	1	•		-	j
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CITY-ST-ZIP	VERO BE		_		3.4. CT	TY-SI	T-ZIP				
TITLE				☐ DELETE	4.1 TIT	LE				☐ Change	e [] Addition
NAME		•			4, 2 N	WE	}				l l
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CITY-ST-ZIP					4.4 CIT	Y-ST	T-ZIP				
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NAME					5.2 NA						}
STREET ADDRESS		-			1		ADDRESS				ļ
CITY-ST-ZIP					5.4 CFT		T-23P		_		
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NAME))			••	6.2 NA						j
STREET ADDRESS	Ì	1			6.3 ST	REET	ADDRESS				ľ

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with arranders of with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: