

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47629

Entity Name: DIGISONIC, INC.

FILED
Jul 13, 2007
Secretary of State

Current Principal Place of Business:

8860 S.W. 50 PLACE
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

8860 SW 50 PL
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 59-2803312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRACUZZI, CHARLES J
8860 S.W. 50 PLACE
COOPER CITY, FL 33328 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STRACUZZI, CHARLES,
Address: 8860 SW 50 PLACE
City-St-Zip: COOPER CITY, FL 33328

Title: T (X) Delete
Name: MARTENS, CECELIA,
Address: 1330 N.E. 210 TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: S (X) Delete
Name: STRACUZZI, VIRGINIA
Address: 8860 SW 50 PLACE
City-St-Zip: COOPER CITY, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES STRACUZZI

PD

07/13/2007

Electronic Signature of Signing Officer or Director

Date