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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DIGITAL MULTI-MEDIA POST, INC. (2)

FILED Mar 16 1998 8:00am Secretary of State

Plincipal Place of Busines STUART FL 34997 SER MANNE STUART FL 34997 SUBS EX MONRE SUBS EX		 					_}			
STUART FL 94997 US STUART FL 94997 US 1. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Op/27/1988 2. Principal Place of Buences 2. Principal Place of Buences 2. Principal Place of Buences 3. Date Incorporated or Qualified Op/27/1988 3. Name and Address 2. Suite, April #, cit. 2. Clay & State 2. Principal Place of Buences 3. Destinated of Status Desired 3. Election Company Finencing 3. Suite, April #, cit. 2. Clay & State 2. Principal Place of Status Desired 3. Election Company Finencing 3. Suite, April #, cit. 3. Name and Address of Current Year Intemplible 4. Personal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 4. Principal Property Tax due June 50. vie 1 No. 5. Principal Property Tax due June 50. vie 1 No. 5. Principal Property Tax due June 50. vie 1 No. 5. Principal Property Tax due June 50. vie 1 No. 5. Principal Proper	l							=-=/r (8 r)		
2. Principal Place of Businesis 2a, Miniling Address 2a, Minilin										
2. Principal Place of Busines 3. Applied For 1912 3. Sulle, Apt. 4, etc. 4. Sulle, Apt. 4, etc. 4		14997					DO NOT WRIT	E IN THIS	SPACE	
2. Principal Place of Business 2. Mulling Address 2. See 291291 Applied for See 291291 Additional Fee Required City & State 291 Additional Fee Required See 291291 Additional Fee Required See		••								
Suite, Apt. #, etc.							09/27/1988			
Suite, Apt P, etc. 2 2 2 2 2 2 2 2 2 2		lace of Business	2a. Mailing Address						A	pplied For
Suite, Apt P, etc. 2 2 2 2 2 2 2 2 2 2	21	26				59-2912291		No	ot Applicable	
City & State City & City & State	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	П	-	
29 Country 29 Tous Fund Contribution Added to Pees 20 Tous Fund Contri	22									- 1
Section Sect	City & Stat	e	†·-···η ΄							
28		Country		Cou	ntrv		 			
Name and Address of Current Registered Agent 10. Name and Address of New Registered 10. Name and Science Agent 10. Name and Address of New Registered 10. Name and Science Agent 10. Name and Address (P.O. Box Number is Not Acceptable) 10. Name and Address of New Registered 10. Name and Science Agent 10. Name and Address (P.O. Box Number is Not Acceptable) 10. Name and Address of New Registered 10. Name and Name an		<u>├</u> ──┐		·						
826 JOHN ST. ORLANDO FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 87 Zip Code 87 Zip Code 88 Zip Code 89 Zip Code 89 Zip Code 89 Zip Code 89 Zip Code 80		and the commencer of the control of		1201						
ORLANDO FL Fig. Fi	KE	ENE, HAROLD CPA.			81	Name				
ORLANDO FL ### City	820	8 JOHN ST.		}	82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
### City ### City ### City ### B8 Zip Code 11. Pursuant to the provisions of Sections 607 0500 and 607 0500 Florids Statutes the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes agent and analysis with and accept the obligations of, Section 607,0505, Florida Statutes SIGNATURE 12. OFFICE IS AND DIRT CICIS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE STORER, MARIE 10. DELETE 11. TITLE 12. OFFICE IS AND DIRT CICIS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 14. OIT-S1-ZIP 15. TITLE 16. TITLE 17. TITLE 18. TIT	OR	KLANDO FL			_	00000000				
11. Pursuant to the provisions of Sections 607 0/40° and 607 14.08. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent. I not obtain it the State of Iterida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I not obtain the State of Iterida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I not obtain the state of registered dependent for the purpose of changing its registered agent. I not obtain the state of registered dependent for the purpose of changing its registered agent. I not obtain the state of registered dependent for the purpose of changing its registered agent. I not obtain the state of registered dependent for the purpose of changing its registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. I not of rectors. Thereby accept the appointment as registered agent. In the purpose of change is a full to the provided agent agent and rectors. Thereby accept the appointment as registered agent. In the purpose of rectors. Thereby accept the appointment as registered agent agent agent and rectors. Thereby accept the appointment as registered agent. In the purpose of rectors. Thereby accept the appointment agent					63				•	
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.06, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and national with, and accept the obligations of Section 607.05.05, Florida Statutes. SIGNATURE Signature by additional and accept the obligations of Control Statutes. SIGNATURE 12. OFFICE IS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PARTICLE STORER, MARIE 1058 HIDDEN RIVER PALM CITY FL 1058 HIDDEN RIVER PALM CITY				ł	B4	City	 		R5 Zip	Code
SIGNATURE					- 1	,			. -	
TITLE	SIGNATURE	Signature: typed or printed name of rear bried a	agent and little it applicable (NO	TE Flogistered			of when reinstating)	DATE	u	
STORER, MARIE 12 NAME 13 STREET ADDRESS 14 CITY -ST - ZIP		OFFICERS A					ADDITIONS/CHANGES TO OFFI	CERS AND		
1.3 STREET ADDRESS		STORER MARIE	C) prefere						change	
TITLE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 1.4 CITY-ST-ZIP DELETE 2.1 TITLE DELETE 2.3 STREET ADDRESS DELETE				•		ADDRESS				
TITLE										
1058 HIDDEN RIVER AVE			DELETE			1-211			Change	Addition
CITY-ST-ZIP	NAME	STORER, ROBERT M.		2.2 NA	ME					
DELETE	STREET ADDRESS	1058 HIDDEN RIVER AVE		2.3 STI	REET	ADDRESS				
NAME	CITY - ST - ZIP	PALM CITY FL		2. 4 CI	TY-S	ST- 2 IP				
STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP 34 CITY-ST-ZIP	TITLE		DELETE	3.1 TIT	LE				Change	Addition
STREET ADDRESS S S S S S S S S S	NAME			3.2 NA	ME					
TITLE DELETE 4.1 TITLE										
NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TIFLE □ DELETE 5.1 TIFLE □ Change □ Addition NAME 5.2 NAME STREET ADDRESS			T 05:545		• • • •	T-ZIP			[] Ob	1 1222
STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 THLE Change Addition NAME 5.2 NAME STREET ADDRESS S.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP	-		L'1 DETETE						LJ Change	LI ADDITION
CITY_ST-ZIP 4 4 CITY_ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 52 NAME STREET ADDRESS S3 STREET ADDRESS CITY_ST-ZIP CITY_ST-ZIP	i									
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME </th <th></th> <th></th> <th></th> <th></th> <th></th> <th>1</th> <th></th> <th></th> <th></th> <th></th>						1				
NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	T DELTE			1-ZIP	***************************************		Change	Addition
STREET ADDRESS CITY-ST-ZIP 53 STREET ADDRESS 54 CITY-ST-ZIP									ட வளமு	L. AUNIONII
CITY-ST-ZIP 54 CITY-ST-ZIP						ADDRESS				
						I				
TITLE I [DELETE 6.1 TETE 1 L'ANDRE L'ADDRIGN	TITLE		DELETE	5 4 CII		1-41			Change	Addition
NAME 62 NAME				-						base - Marie off
	STREET ADDRESS			1		ADDRESS				
	•					I				
	CITY-ST-ZIP			6.4 CIT		I				

14. Thereby 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 suppliemental 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 altachment with an address.

3/6/08 51/-2822728