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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 05 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K44978

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DIGHEC	AUDIO PHODUCHONS,	INC.		A HÀOLEINI ON BHAN BHEN TÀIN ADACH	1811 9380 8380 8180 8181 8181 8181 1811
Principal Place of Business		Mailing Address			
6355 METROWEST BLVD., SUITE 290 ORLANDO FL 32635-6206 US		6355 METROWEST BLVD., SUITE 290 ORLANDO FL 32835-6206 US			
••		•		3. Date Incorporated or Qualifie	1
2. Principal Place of Business		2a. Mailing Address		11/10/1988 4. FEI Number	01/24/1996
21		26		59-2927757	Applied For Not Applicable
Suite Apt	# etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
Oity & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23] Zip	Country	Z(p)	Country	Trust Fund Contribution	LJ Added to Fees for intangible tax under s. 199.032,
24	25	29	30	Florida Statutes	Yes No
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New	Registered Agent
SHE	rdel, John R.		81 Name		
	CREEKSTONE COURT		82 Street A	ddress (P.O. Box Number is Not Accep	table)
LON	GWOOD FL 32779		83		
			84 City		FL 85 Zip Code
11. Pursuant office or reached La	to the provisions of Sections 607.0 egistered agent, or both, in the Starr familiar with, and accept the ob-	502 and 607.1508, Florida Statulite of Florida Such change was ligations of Saction 607.0505, Fl	tes, the above-named of authorized by the corporation Statutes	corporation submits this statement for the oration's board of directors. I hereby ac	e purpose of changing its registered
SIGNATURE	1100		oriote oratotos.		
	Signature, typed or printed name of registered		ft.: Registered Agent signature r		DATE
TITLE	_	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition
NAME	D CHEDDEL TOUR D		1.2 NAME		C Change C Adollon
STREET ADDRESS	SHERDËL, JOHN R. 381 CREEKSTONE COURT		1.3 STREET ADDRESS		
011Y+\$1+ Z (F	LONGWOOD FL		1.4 C/TY+ST-Z/P		
THLE	The state of the s	☐ DELETE	2 1 TITLE		Change Addition
MAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
City - St - Zill Title		DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		Otter	3.2 NAME		Charge Montion
STREET ADORESS			3.3 STREET ADDRESS		
CDY S1-ZF			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP TOTALE		DELETE	4.4 CITY · ST - ZIP 5.1 TITLE		Change Addition
NAME		the state of the	5.2 NAME		C diange C Notition
STREET ACCIPIESS			5.3 STREET ADDRESS		
CITY-ST ZIP			5.4 CITY - ST - ZIP		
THILE		☐ D£LETE	6.1 TITLE	, , , , , , , , , , , , , , , , , , , ,	Change Addition
NAME			6.2 NAME	•	
STREET ADDRESS	A .	. \	6.3 STREET ADDRESS		
14. I do heret	y certify that the information supp	lied with this filing does not quali	■ 6.4 CITY-ST-ZIP	ated in Section 119.07(3)(i), Florida Stat	utes. I further certify that the
informatio Lam an of	n indicated on this arrival f ebo rt f	r supplemental annual report is t or the receiver or trustee empoy	true and accurate and t vered to execute this re	hat my signature shall have the same le port as required by Chapter 607, Florid	anal effect as if made under eath: that l
SIGNAT		ON PHINTED NAME OF BIGNING OFFICE	TOR DIRECTOR	Date	Daytima Ptiona ≯