

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000013107

1. Entity Name
DIGITAL HEAVY, L.L.C.

Principal Place of Business Mailing Address
1020 EAST LAFAYETTE STREET, SUITE 206-B 1020 EAST LAFAYETTE STREET, SUITE 206-B
TALLAHASSEE FL 32301 TALLAHASSEE FL 32301

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

MIDNIGHT ONLINE
1020 EAST LAFAYETTE STREET, SUITE 206-B
TALLAHASSEE FL 32301

4. FEI Number 59-3679122 Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

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-05/25/01--01017--022
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGRM BROWN, JON D 1020 EAST LAFAYETTE STREET, SUITE 206-B TALLAHASSEE FL 32301

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10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Jon D. Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04.30.01 850.847.1887
Date Daytime Phone #

FILED

01 MAY -2 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E083 (11/00)