

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013105

Entity Name: DIGORE SYSTEMS LLC

FILED  
Feb 22, 2004  
Secretary of State

## Current Principal Place of Business:

2921 SW 1 ST  
MIAMI, FL 33135

## New Principal Place of Business:

20871 NW 18 ST  
PEMBROKE PINES, FL 33029

## Current Mailing Address:

2921 SW 1ST  
MIAMI, FL 33135

## New Mailing Address:

20871 NW 18 ST  
PEMBROKE PINES, FL 33029

FEI Number: 03-0454530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PINTO, SANDRA M  
2921 SW 1 ST  
MIAMI, FL 33135

## Name and Address of New Registered Agent:

PINTO, SANDRA M  
20871 NW 18 ST  
PEMBROKE PINES, FL 33029

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:

02/22/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: PINTO, SANDRA M  
Address: 2921 SW 1 ST  
City-St-Zip: MIAMI, FL 33135

Title: MGRM ( ) Delete  
Name: GOMEZ, GRACIELA  
Address: 2921 SW 1 ST  
City-St-Zip: MIAMI, FL 33135

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PINTO, SANDRA M  
Address: 20871 NW 18 ST  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM (X) Change ( ) Addition  
Name: GOMEZ, GRACIELA  
Address: 20871 NW 18 ST  
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: SANDRA M PINTO

MGRM

02/22/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date