

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0016068

DOCUMENT # L02000013119

1. Entity Name

DIGITAL HOLDINGS LLC



Principal Place of Business

1190 SW 19TH STREET  
BOCA RATON FL 33486

Mailing Address

1190 SW 19TH STREET  
BOCA RATON FL 33486

2. Principal Place of Business

323 CARDINAL AVE

3. Mailing Address

323 CARDINAL AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

Zip

33486

Country

USA

Zip

33486

Country

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DI MUSTO, ALEXANDER  
1190 SW 19TH STREET  
BOCA RATON FL 33486

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/15/03

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By September 24, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ALEXANDER DI MUSTO  
MANAGER  
323 CARDINAL AVE.  
BOCA RATON, FL 33486

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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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:

SIGNATURE REQUIRED

9/15/03

561-955-1782

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (4/03)