## 2005 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Jul 05, 2005 08:00 AM **DOCUMENT # L03000011718 Secretary of State** 1. Entity Name DIGITAL ECHO, LLC Principal Place of Business Mailing Address 4902 SOUTH OLD DIXIE HIGHWAY, SUITE 104 1002 SOUTH OLD DIXIE HIGHWAY, SUITE 104 JUPITER, FL 33458 JUPITER, FL 33458 07012005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VARGAS, ROBERTO M DO NOT WRITE 505 SOUTH FLAGLER DRIVE, SUITE 1100 WEST PALM BEACH, FL 33401 IN THIS SPACE 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. DATE Signature, typed or pinted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE VARGAS, AGUSTIN A M.D. NAME 1002 S. OLD DIXIE HWY #104 STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this fiting 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 path; 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.

GING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING M