

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000052627

**FILED**  
**Apr 16, 2011**  
**Secretary of State**

**Entity Name:** DIGITAL WEB ALLIANCE, LLC

**Current Principal Place of Business:**

5550 LAKEWOOD CIRCLE SOUTH  
SUITE B  
FORT LAUDERDALE, FL 33063 US

**New Principal Place of Business:**

5550 LAKEWOOD CIRCLE SOUTH  
SUITE B  
MARGATE, FL 33063 US

**Current Mailing Address:**

5550 LAKEWOOD CIRCLE SOUTH  
SUITE B  
MARGATE, FL 33063 US

**New Mailing Address:**

**FEI Number:** 27-1798485      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TORRES, JO-JOHN M  
5550 LAKEWOOD CIRCLE SOUTH  
SUITE B  
MARGATE, FL 33063 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MR.  
**Name:** TORRES, JO-JOHN M  
**Address:** 5550 LAKEWOOD CIRCLE SOUTH SUITE B  
**City-St-Zip:** MARGATE, FL 33063 US

I hereby 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: JO-JOHN M TORRES

MR.

04/16/2011

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