STREET ADDRESS

14. I hereby certify that the information supplied with the indicated on this annual report or supplemental agriculture of the corporation or the feceiver Block 12 or Block 13 if changed, or on an attaching.

CITY-ST-ZIP

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** Feb 18 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L50740 DGSG, INC. Principal Place of Business Mailing Address 1475 W CUPRESS CREEK RD 1475 W CUPRESS CREEK RD SUITE 204 SUITE 204 DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 3. Date Incorporated or Qualified 02/16/1990 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0181704 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GOLDING, DEENA Martin Thirer 1475 W CYPRESS CREEK ROAD Street Address (P.O. Box Number is Not Acceptable)
1475 W. Cypress Creek Road, Suite 204 62 SUITE 204 FT LAUDERDALE FL 33309 В3 84 Zip Code 33309 Ft. Lauderdale, 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. There SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change K Addition TITLE GOLDING, DEENA 1.2 NAME Golding, Stephen NAME 1101B HIGHLAND BCH DRIVE 1101B Highland Beach Drive STREET ADDRESS 1.3 STREET ADDRESS HIGHLAND BCH FL Highland Beach, Fl. 33487 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change 2.1 TITLE 2.2 NAME NAME EEL ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP □ DELETE Change Addition 31 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS STREET ADDRESS ST-ZIP 5.4 CITY CITY-ST-ZIP Change Addition TITLE NAME

6.3 STREET APORESS

this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information mual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1/10/08

/Q5/\777-7878