

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003566

Entity Name: WESTON DIGITAL CITY, LLC

FILED  
Jan 10, 2007  
Secretary of State

**Current Principal Place of Business:**

1820 N. CORPORATE LAKES BLVD, #102  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 266844  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 65-0930073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEMIVES, JULIA  
18000 NW 2 AVE  
MIAMI, FL 33169 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: MGRM ( ) Delete  
Name: DIPOLOG CONSULTING L, IMITED  
Address: I. BATTHYANY U. 46  
City-St-Zip: BUDAPEST, HUNGARY, HU 1015 HU

Title: MGRM ( ) Delete  
Name: DEBRECZENI, SANDOR  
Address: 1271 SABAL TRAIL  
City-St-Zip: WESTON, FL 33327 US

Title: MGR (X) Delete  
Name: DEBRECZENINE, MAGDOLNA  
Address: 1271 SABAL TRAIL  
City-St-Zip: WESTON, FL 33327 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DIPOLOG CONSULTING L, IMITED  
Address: I. BATTHYANY U. 46  
City-St-Zip: BUDAPEST, HUNGARY, HU 1016 HU

Title: MGRM (X) Change ( ) Addition  
Name: DEBRECZENINE, MAGDOLNA P  
Address: 1271 SABAL TRAIL  
City-St-Zip: WESTON, FL 33327 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MAGDOLNA P DEBRECEZENINE

MGRM

01/10/2007

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