2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 AM
Secretary of State

DOCUMENT# M00000002376

Entity Name: DIGITAL LATIN AMERICA LLC

Current Principal Place of Business:

4117 N.W. 124TH AVENUE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

4117 N.W. 124TH AVENUE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 23-3037609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE, 28TH FLOOR
MIAMI, FL 33131 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/MEMBERS:

Title: CHRM ( ) Delete
Name: HICKS, THOMAS O
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete
Name: NEUMAN, ERIC C
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete
Name: BAEZ, CESAR
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete
Name: HOWARD, GARY
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete
Name: ERICKSON, MIKE
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete
Name: ARMSTRONG, GREG
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HICKS, THOMAS O
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

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

Title: MGR (X) Change ( ) Addition
Name: SAVOLDELLI, PAUL
Address: 4117 N.W. 124TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

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

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

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 Section 119.07(3)(i), 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: MIKE ERICKSON MGR 02/12/2002

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