2002 UNIFORM BUSINESS REPORT (UBR)

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Mar 24, 2002 8:00 am § Secretary of State DOCUMENT # M95525 1. Entity Name 03-24-2002 90080 049 ***158.75 DIG - USA, INC. Principal Place of Business Mailing Address 7601 DUNLEER WAY 1000 E HILLSBORO BLVD DALLAS TX 75248 SUITE 100 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0104284 Not Applicable Country Country \$8.75 Additional Zip Zip **X**J 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRENNER, SCOTT Street Address (P.O. Box Number is Not Acceptable) 1000 E HILLSBORO BLVD SUITE 100 Zip Code DEERFIELD BEACH FL 33441 FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME SENECAL, WAYNE T. STREET ADDRESS STREET ADDRESS 7601 DUNLEER WAY CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75248 ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME DUMBERGER, JOSEPH STREET ADDRESS STREET ADDRESS 7601 DUNLEER WAY CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75248 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

T 1027(50) L TO 1. 9

Date

Daytime Phone #

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED