2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# N05000005645

Entity Name: GH DIGIT, INC.

Current Principal Place of Business:

46 N.E. 6TH STREET
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

46 N.E. 6TH STREET
MIAMI, FL 33132

New Mailing Address:

FEI Number: 87-0746857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LINCOLN, TIMOTHY C
46 N.E. 6TH STREET
MIAMI, FL 33132 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

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: LINCOLN, TIMOTHY C
Address: 46 N.E. 6TH STREET
City-St-Zip: MIAMI, FL 33132

Title: S/D ( ) Delete
Name: MIRANDA, ELDA M
Address: 46 N.E. 6TH STREET
City-St-Zip: MIAMI, FL 33132

Title: T/D (X) Delete
Name: DIAZ, MAYRA
Address: 7401 S.W. 132ND AVENUE
City-St-Zip: MIAMI, FL 33183

Title: S (X) Delete
Name: JOHNS, PHYLLIS
Address: 5601 NORTH DIXIE HIGHWAY STE. 411
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: JOHNS, PHYLLIS
Address: 5601 N. DIXIE HIGHWAY, SUITE 411
City-St-Zip: FT. LAUDERDALE, FL 33334

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY C. LINCOLN P/D 03/17/2009

Electronic Signature of Signing Officer or Director — Date