## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OF P

AINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## May 11, 2001 8:00 am DOCUMENT # P0000054571 Secretary of State TOMORROW'S DIGITAL, CORP. 05-11-2001 90023 011 \*\*\*150.00 Principal Place of Business Mailing Address 2402 NORTH DIXIE HWY #6 2402 NORTH DIXIE HWY #6 LAKE WORTH FL 33460 LAKE WORTH FL 33460 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1013608 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JAMES BLACKHALL REGO. WILLIAM M JR. Street Address (P.O. Box Number is Not Acceptable) 2402 NORTH DIXIE HWY #6 LAKE WORTH FL 33460 2402 NORTH DIXIE HWY #6 Zip Code 33460 City FL LAKE WORTH 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. SIGNATURE of registered agent and title if applicable (NOTE: Registered Agent signature required when re-FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. **PSD** Change Addition ■ Delete TITLE TITLE REGO. WILLIAM M JR NAME NAME STREET ADDRESS 2402 NORTH DIXIE HWY #6 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33460 PRESIDENT VTD ☐ Delete TITLE Change Addition TITLE BLACKHALL, JAMES NAME NAME BLACKHALL, JAMES STREET ADDRESS 2402 NORTH DIXIE HWY #6 STREET ADDRESS 2402 NORTH DIXIE HWY #6 CITY-ST-ZIE LAKE WORTH FL 33460 CITY-ST-ZIP LAKE WORTH, FLORIDA 33460 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete 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-ZIF CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE 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

-941 8823

Daytime Phone #