2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003
Secretary of State

DOCUMENT# P00000083253

Entity Name: DIGITAL TECHNOGRAPHICS, INC.

Current Principal Place of Business:

590 N.W. PEACOCK BLVD.
#8
PORT ST LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

590 N.W. PEACOCK BLVD.
#8
PORT ST LUCIE, FL 34986

New Mailing Address:

FEI Number: 65-1041332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ZACCHEO, SHAWN
3539 SW SUNSET TRACE CIRCLE
PALM CITY, FL 34490 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ZACCHEO, SHAWN
Address: 3539 S.W. SUNSET TRACE CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: ST ( ) Delete
Name: ZACCHEO, SUSAN
Address: 1951 S.W. WINNERS DR.
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN ZACCHEO ST 01/31/2003

Electronic Signature of Signing Officer or Director — Date