FILED May 13, 2003 8:00 am Secretary of State 05-13-2003 90047 030 ***150.00

1. Entity Nan	MENT # P010000063				90133472
	e of Business ZND TERRAPE 33323	Mailing Address 3998 NW 122ND TERRAC SUNRISE, FL 93323	3998 NW 122ND TERRACE		
2. Principal Place of Business 6310 CSPLEY TERRACE 6310 OSPLEY TERRACE Suite, Apt. #, etc. Suite, Apt. #, etc.				Ace	St CHECK HERE IF MAKING CHANGES
City & State CCCOOLIT Creek, FL COCOOLIT			cer, F	L	4. FEI Number X Applied For
Zip 330	Country Theoreta	Zp 35073	Country	₩	5. Certificate of Status Desired \$8.75 Additional Fee Required
Name and Address of Current Registered Agent Name				7. Name and Address of New Registered Agent	
WILLIAMS, CHERYL N 3990 NW 122ND TERRACE Street Address (P.O. Box Number is Not Acceptable) SUNIRIDE, Pt. 3932					
6310 OSPREY TERANCE					
coconut creek, FL 33073 any FL ZpCode					
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOWN FEBRIS 150:00+ After (Nay 1-2003 Februal Department of State) Make (Crick Payable to Flanda Department of State) Added to Fees					
10.	OFFICERS AND D		11.	1 22-44	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Sicker © Change ☐ Addition 8
TITLE NAME STREET ADDRESS	D WILLIAMS, ROBERT F 3998 NW 122ND TERRACE	☐ Delete	TITLE NAME STREET ADDRESS	Min	SIGNET Schange Addition & Change Addition & Change
CITY-S1-2P	SUNRISE, FL 33323		CITY-ST-ZIP	1 -	CONUT Creek FL 33073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, CHERYL N 3998 NW 122ND TERRACE SUNRISE, FL 33323	☐ Celete	TITLE NAME STREET ADDRESS CRY-ST-ZIP	631	© OSPLEY TEXACE COUNT Creck, PC 330+3
TITLE HAME STREET ADDRESS CITY-ST-2P		□ Dek le	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS COY-ST-2IP		☐ Change ☐ Addition
TITLE MAINE STREET ADDRESS CITY-SI-2P		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		· Change Addition
TITLE HAME STREET ADDRESS CITY-ST-ZP		□ Delete	TATLE NAME STREET ADDRESS CRY-ST-ZIP		☐ Change ☐ Addition
12. Thereby certify that the information supplied with this filling 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 suppliermental 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 occurrence or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: OS/Ob/12003 954 695 6463					
SIGNATURE AND TYPED OR PERMIT ED HAME OF SIGNING OFFICER OR DIRECTION Date Design Plant 2					

May 6, 2003

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Documen(: P01000006315 DigitalPro Entertainment

Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Secretary of State,

Please be advised that DigitalPro Entertainment had a change of address and notified "The Division of Corporation". Our mail was forwarded to our new address and our company never received the "Uniform Business Report". We had to go online to download the form and now submitting our "UBR".

Enclosed is a check in the amount of \$150.00, please waive all late charges and penalties.

Any question, please contact Robert Williams at 954-695-6463

Thank you very much,

Khwilliam >

Robert F. Williams President Digital Pro Entertainment, Inc.

RFW

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