

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000035306

Entity Name: DIGIMAXISP, INC.

FILED
May 03, 2006
Secretary of State

Current Principal Place of Business:

8200 CLEARY BLVD APT 2013
PLANTATION, FL 33324

New Principal Place of Business:

12688 NW 14 PL
SUNRISE, FL 33323

Current Mailing Address:

8200 CLEARY BLVD APT 2013
PLANTATION, FL 33324

New Mailing Address:

12688 NW 14 PL
SUNRISE, FL 33323

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARY, DENNIS J
138 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33432 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FELLER, ALAN S
Address: 287 NORTHERN BLVD SUITE 200
City-St-Zip: GREAT NECK, NY 11021

Title: D () Delete
Name: SUSSMAN, MICHAEL
Address: 1730 S FEDERAL HWY SUITE 151
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: BENJAMIN, CHRISTOPHER J A
Address: 8200 CLEARY BLVD APT 2013
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

SIGNATURE: CHRISTOPHER BENJAMIN

D

05/03/2006

Electronic Signature of Signing Officer or Director

Date