

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90032 013 ***150.00

DOCUMENT # P01000104243

1. Entity Name

DIGIBOL, INC.

Principal Place of Business

**3000 SOUTH OCEAN DRIVE
 UNIT 5E
 HOLLYWOOD FL 33019**

Mailing Address

**3000 SOUTH OCEAN DRIVE
 UNIT 5E
 HOLLYWOOD FL 33019**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3000 S. Ocean Dr.

Suite, Apt. #, etc.

Apt. # 5E

City & State

Hollywood, FL

Zip

33019 U.S.A.

3. Mailing Address

3000 S. Ocean Dr.

Suite, Apt. #, etc.

Apt. # 5E

City & State

Hollywood, FL

Zip

33019 U.S.A.

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75** Additional
 Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
 1840 SW 22ND ST.
 4TH FLOOR
 MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name **Spiegel & Utrera, P.A.**
 Street Address (P.O. Box Number is Not Acceptable)
1840 SW 22ND ST.
4th Floor
 City **Miami** FL Zip Code **33145**

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.

SIGNATURE

SPIEGEL & UTRERA, P.A.

2-13-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
 (See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

**After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election-Campaign Financing
 Trust Fund Contribution.

☐ **\$5.00** May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **PAZ, JORGE F**
 STREET ADDRESS **3000 SOUTH OCEAN DRIVE UNIT 5E**
 CITY-ST-ZIP **HOLLYWOOD FL 33019**

TITLE **VD** ☐ Delete
 NAME **LEON, MARCO A**
 STREET ADDRESS **3000 SOUTH OCEAN DRIVE UNIT 5E**
 CITY-ST-ZIP **HOLLYWOOD FL 33019**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Change ☐ Addition
 NAME **PAZ Jorge F**
 STREET ADDRESS **3000 S. Ocean Dr. #5E**
 CITY-ST-ZIP **Hollywood, FL 33019**

TITLE **VD** ☐ Change ☐ Addition
 NAME **Leon, Marco A**
 STREET ADDRESS **3000 S. Ocean Dr. #5E**
 CITY-ST-ZIP **Hollywood, FL 33019**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leon Marco Antonio

2-13-02

(954) 9203301

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)