

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107459

FILED
Apr 22, 2008
Secretary of State

Entity Name: DIGITO AZUL CORP

Current Principal Place of Business:

5601 POWERLINE ROAD
SUITE #203
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

4700 WEST PROSPECT ROAD
SUITE #110
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

4401 NW 20TH AVENUE
OAKLAND PARK, FL 33309 US

New Mailing Address:

FEI Number: 65-1150286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GODD-SANTANA, ANGEL
4401 NW 20TH AVENUE
OAKLAND PARK, FL 33309 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 (X).

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GODD-SANTANA, ANGEL
Address: 4401 NW 20TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33309

Title: VP () Delete
Name: GRANISH, DANIEL
Address: 4401 NW 20TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33309

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 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: ANGEL GODD-SANTANA

P

04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date