

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000109402

**Entity Name:** DIGITAL WAVE GRAPHICS, INC.

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5601 PINE TERRACE  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

5601 PINE TERRACE  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 65-1157793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRUCKNER, MITCH  
4300 NORTH UNIVERSITY DR. SUITE A106  
LAUDERHILL, FL 33351 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MUGAN, LAURIE  
Address: 5601 PINE TERRACE  
City-St-Zip: PLANTATION, FL 33317

I hereby 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 all other like empowered.

SIGNATURE: LAURIE MUGAN

PD

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date