2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2003
Secretary of State

DOCUMENT# P02000008420

Entity Name: DIGITAL OZONE, INC.

Current Principal Place of Business:

4655 SALISBURY RD STE 390
JACKSONVILLE, FL 32216

New Principal Place of Business:

7077 BONNEVAL ROAD
STE 450
JACKSONVILLE, FL 32216

Current Mailing Address:

4655 SALISBURY RD STE 390
JACKSONVILLE, FL 32216

New Mailing Address:

7077 BONNEVAL ROAD
SUITE 450
JACKSONVILLE, FL 32216

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOTOLAW, INC.
50 NORTH LAURA ST STE 2500
JACKSONVILLE, FL 32202 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 ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NALLAPILLAI, MANIVANNAN
Address: 4655 SALISBURY RD STE 390
City-St-Zip: JACKSONVILLE, FL 32216

Title: D (X) Delete
Name: RAMAKRISHNAN, RANJIT T
Address: 4655 SALISBURY RD STE 390
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: NALLAPILLAI, MANIVANNAN
Address: 4655 SALISBURY RD STE 390
City-St-Zip: JACKSONVILLE, FL 32216

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 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 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: MANI NALLAPILLAI PS 04/08/2003

Electronic Signature of Signing Officer or Director — Date