2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# P03000037591

Entity Name: DIGGER SOLUTIONS, INC.

Current Principal Place of Business:

7420 NW 5TH STREET
112
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

7420 NW 5TH STREET
112
PLANTATION, FL 33317

New Mailing Address:

804 SW 19TH STREET
FORT LAUDERDALE, FL 33315

FEI Number: 41-2088269 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, MICHAEL A
3789 DAPHNE AVE
PALM BEACH GARDENS, FL 33410

Name and Address of New Registered Agent:

WILSON, MICHAEL A
804 SW 19TH STREET
FORT LAUDERDALE, FL 33315

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: MICHAEL WILSON 04/13/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILSON, MICHAEL A
Address: 3789 DAPHNE AVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP ( ) Delete
Name: WILSON, CHRISTINE L
Address: 3789 DAPHNE AVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WILSON, MICHAEL A
Address: 804 SW 19TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VP (X) Change ( ) Addition
Name: WILSON, CHRISTINE L
Address: 804 SW 19TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

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: MICHAEL WILSON P 04/13/2004
Electronic Signature of Signing Officer or Director Date