

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085001

FILED
Jul 14, 2004
Secretary of State

Entity Name: DIGAL DISTRIBUTOR DOLLAR CORP.

Current Principal Place of Business:

2721 SW 139TH PL.
MIAMI, FL 33175

New Principal Place of Business:

7255 SW 24TH ST
MIAMI, FL 33155

Current Mailing Address:

2721 SW 139TH PL.
MIAMI, FL 33175

New Mailing Address:

7255 SW 24TH ST
MIAMI, FL 33155

FEI Number: 04-3769099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALINDO, LUIS A
2721 SW 139TH PL.
MIAMI, FL 33175

Name and Address of New Registered Agent:

CABAL, DAYANA
7255 SW 24TH ST
MIAMI, FL 33155

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: DAYANA CABAL

07/14/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GALINDO, LUIS A
Address: 2721 SW 139TH PL.
City-St-Zip: MIAMI, FL 33175

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CABAL, DAYANA
Address: 7255 SW 24TH ST
City-St-Zip: MIAMI, FL 33155

Title: VD () Change (X) Addition
Name: ROJAS, PATRICIA
Address: 7255 SW 24TH ST
City-St-Zip: MIAMI, FL 33155

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: DAYANA CABAL

PD

07/14/2004

Electronic Signature of Signing Officer or Director

Date