FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000045770 (3)

DIGITAL DIRECTION, INC.

FILED						
Jan 28	1998	8:00am				
Secret	tary (of State				

Principal Place	e of Business	Mailing Address	·			1588) MINI ANDIN 18811 8811 3811
	YPRESS CREEK ROAD	2700 WEST CYPRESS CRI	FFK ROAD			
SUITE C-108	THEO OILLY HOND	SUITE C-108				
	ALE FL 33309-1719	FT. LAUDERDALE FL 3330	9-1719		DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
- <u>-</u>					06/29/1993 4. FEI Number	
`	lace of Business	2a. Mailing Address				Applied For
Suite, Apt.	H ata	Suite, Apt. #, etc.			65-0421163	Not Applicable \$8.75 Additional
22 Sune, Apr.	#, B (G)				5. Certificate of Status Desired	Fee Required
City & State	9	City & State			Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the o	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curi	ent Registered Agent		-1	10. Name and Address of New Registers	d Agent
	KACHER, JOEL		В	1 Name		
	33 S W 118TH AVE		B	2 Street Add	ress (P.O. Box Number is Not Acceptable)	
CO	OPER CITY FL 33330		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
			8	3		
			В	4 City		85 Zip Code
					F	
office or r	agistared agant or both in the Sta	ito of Florida. Such change was at	uthorized l	by the cornora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505, Floi	rida Statut	es.	•	
SIGNATURE					ired when reinstating) DATE	
10	Signature, typod or printed name of registered OFFICERS A	AND DIRECTORS	Hagistered A	gent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	D	DELETE	1.1 TITLE		NODITIONG OF BUILDING	Change Addition
NAME	LUKACHER, JOEL		1.2 NAM			
STREET ADDRESS	5333 SW 118TH AVE			FT ADDRESS		
CITY-ST-ZIP	COOPER CITY FL 33330		1.4 CITY			
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAM	E		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
			2. 4 CITY	'-ST-ZIP		· <u>-</u>
		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP	<u> </u>	
TITLE		☐ DEŁETÉ	4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS				E1 ADDRESS		
CITY-ST-ZIP		DECEST	4,4 CITY			Change Addition
TITLE		☐ DELETE	5.1 TITLE	i		Change Addition
NAME			5.2 NAMI	- 1		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	<u> </u>	☐ DELETÉ	5.4 CITY 6.1 TITLE			Change Addition
TITLE NAME			6.2 NAM			change reaction
				ET ADDRESS		
STREET ADDRESS				i		
CITY-ST-ZIP	all and a second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6.4 CITY		Paction 110 07/2\(\text{ii}\) Elerida Statutas I further	portify that the information

I hereby certify that the information supplied with this timing does not qualify in-indicated on this annual report or supplemental annual report is true and accu-officer or director of the corporation or the recoiver or trustee empowered to Block 12 or Block 13 if changed, or on an attachment with an address. of in Section 19.07(3)(i), Florida Statutes. If furnier certify that the information nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in