

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2000 8:00 am
Secretary of State
 02-19-2000 90022 002 ***150.00

DOCUMENT # P93000045770

1. Entity Name

DIGITAL DIRECTION, INC.

Principal Place of Business

2700 WEST CYPRESS CREEK ROAD
 SUITE C-108
 FT. LAUDERDALE FL 33309-1719
 US

Mailing Address

2700 WEST CYPRESS CREEK ROAD
 SUITE C-108
 FT. LAUDERDALE FL 33328-3713
 US

2. Principal Place of Business

8660 Griffin Road
 Suite, Apt. #, etc.

3. Mailing Address

8660 Griffin Road
 Suite, Apt. #, etc.

City & State

Cooper City, FL

City & State

Cooper City, FL

Zip

33328

Country

USA

Zip

33328

Country

USA

4. FEI Number

65-0421163

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LUKACHER, JOEL
 5333 SW 118TH AVE
 COOPER CITY FL 33330

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Joel Lukacher, president

(NOTE: Registered Agent Signature required when reinstating)

DATE

2/4/2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME D
 STREET ADDRESS LUKACHER, JOEL
 CITY-ST-ZIP 5333 SW 118TH AVE
 COOPER CITY FL 33330

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joel Lukacher, president

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/2000

Date

954-680-9886

Daytime Phone #