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

PROFIT CORPORATION ANNUAL REPORT

1998

officer or director of the corpor Block 12 or Block 13 July de



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000097993 (6) DOCUMENT #

DIGITAL REPAIR + DESIGN, INC.

Principal Place of Business

Mailing Address

FILED Jun 30 1998 8:00 am Secretary of State



1501 DECKER AVE UNIT 124 1501 DECKER AVE UNIT 124 STUART FL 34994 STUART FL 34994 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1996 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 65-0629725 Not Applicable 21 Sulte, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 25 29 . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 VAN **DIE**N, CHARLES W III Name 1501 **DE**CKER AVE UNIT 124 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (A) when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 100 CHARLES W. VANDIRN III VAN DIEN, CHARLES W II NAME 1.2 NAME 1501 Decker Ave #124 **2008 EDGEWATER TERR** STREET ADDRESS 1.3 STREET ADDRESS **B**ebring FL 33870 STVANT, FL 34994 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition DELANCY, VIRGINIA M NAME 2.2 NAME 1298 W. GLADIOLA DRIVE STREET ADDRESS 2.3 STREET ADDRESS **ÅVON PARK FL 33825** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE 51 DHE 900002577369 NAME 5.2 NAME - **07**/81/38---01046- --0**0**3 STREET ADDRESS **5.3 STREET ADDRESS** ***150.00 CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 City - ST - ZIP

14. Thereby 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 annual report or supplemental annual expert in 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 computing of the receiver or visited impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in