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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000041895**1. Corporation Name

DIGITAL MEDIA DESIGN GROUP, INC.

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Principal Place	e of Business	Mailing Address				1 10011981 110 10110 E1111 8041 0	Astr Daith anish a	1861 HAND (BH)	L 1801 O 1 O 1 O 1 O 0 O 1
2826 E OAKLAND PARK BLVD. 2826 E OAKLAND PAR SUITE 300 SUITE 300			BLVD.			•			
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306						DO NOT WRITE IN THIS SPACE			
US		US			3.	Date Incorporated or Qualifed	l		}
						05/10/1996			
⊢ ·	lace of Business	2a. Mailing Address			4.	FEI Number			oplied For
21	W. A.	26				65-0666886			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	. Certifcate of Status Desired		, .	Additional equired
City & Stat	de	City & State				, Election Campaign Financing		\$5.00	May Be
23	•	28			"	Trust Fund Contribution		•	to Fees
Zip	Country	Zip	Country	,	8.	. This corporation owes the cur	rent year Inte	angible	
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	t Registered Agent		T		Name and Address of New	Registered A	Agent	
DIEC	CED ANDEDT I		81	Nam	е				ν .
	Ger, gilbert l 3 e oakland park blyd.		82	Stree	et Address (I	P.O. Box Number is Not Accept	able)		*****
	E 300		83	<u> </u>					
	LAUDERDALE FL 33306		63	'					
'''			84	City			FL	85 Zip	Code
44 Dureuant	to the provisions of Sections 607.0502	2 and 607 1508 Florida Statute	e the ahov	e-name	d corporatio	on submits this statement for the		changing its	registered
l office or r	egistered agent, or both, in the State (of Florida. Such change was au	uthorized by	the co	rporation's b	poard of directors. I hereby acce	pt the appoir	ntment as re	egistered
	m familiar with, and accept the obligat	tions of, Section 607.0505, Fior	ida Statutes	š.					ſ
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE:	Registered Age	nt signatu	e required when	reinstating)	DATE		
12.		at and title if applicable. (NOTE: D DIRECTORS	Registered Age	nt signatu		reinstating) ADDITIONS/CHANGES TO OF		D DIRECTO	DRS IN 12
				nt signatui				D DIRECTO	ORS IN 12
12.	OFFICERS AN	D DIRECTORS	13.	nt signatu					
12.	OFFICERS AN	D DIRECTORS	13. 1.1 TITLE						
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changes, or one attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP