

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90738 045 ***150.00

DOCUMENT # P96000098126

1. Entity Name

Digiwerks, Inc.

DO NOT WRITE IN THIS SPACE

80062035

2. Principal Place of Business

240 SW 15 RD

3. Mailing Address

4450 SW 143 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

113

City & State

Miami

City & State

Miramar

Zip

33129

Country

USA

Zip

33027

Country

USA

4. FEI Number

650709503

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Richard Whittaker

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

4450 SW 143 Ave

City

Miramar

FL

Zip Code

33027

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

Richard Whittaker

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/1/2002
DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY- ST- ZIP

PD
Richard Whittaker
240 SW 15 RD, unit 113
Miami, FL 33129

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

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CITY- ST- ZIP

DO NOT WRITE
IN THIS SPACE

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 on an attachment with an address, with all other like empowered

SIGNATURE:

Richard Whittaker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/02
Date

305-586-9519
Daytime Phone #