## 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 # P96000098303 (6)

DIGITAL DATA PUBLISHING, INC.

## **FILED** Apr 10 1998 8:00am Secretary of State



I micipai mac	e or pusitiess	Walling Address					
701 BRICKELL AVE. SUITE 3000 701 BRICKE			TE 3000				
MIAMI FL 331	រុស	MIAMI FL 33131			DO NOT WRITE IN THIS SPACE		
į					3. Date incorporated or Qualified	THIS SPACE	
					I		1
2. Principal Place of Business 2a. Mailing Address					12/05/1996 4. FEI Number		1
21 26					, · · ·	h	Applied For
Sulte, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.		65-0710614		Not Applicable
22		27	27		5. Certificate of Status Desired	Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0	O May Be
23	28						d to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid	the current vear I	ntangible
24	25 29 30						
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
INT	RASTATE REGISTERED AGE	NT CORPORATION	81	Name	1114		
701 BRICKELL AVE, SUITE 3000				Street Ad	dress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33131			-	00000170	ididas (1.0. dox Norilosi is Not Acceptable)		
			63				
				ļ.,			
			84	City		E 85 Zip	p Code
11, Pursuant	to the provisions of Sections 607	0502 and 607.1508. Florida Statut	es, the abov	e-named co	propration submits this statement for the pure	page of changing	its registered
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	Signature, typed or printed name of registere	d agent and title if applicable (NO)	F: Registered An	ent timpalwa reg	quired when reinstating)	DATE	
12.		AND DIRECTORS	13.	on agrada req	ADDITIONS/CHANGES TO OFFICER		100 IN 12
TITLE	DPTS DELETE		1.1 TITLE		ADDITIONS/OFFANCES TO CITTOET	Change	
NAME	SEMERENE, JAVIER	<del></del>	1.2 NAME				
STREET ADDRESS 701 BRICKELL AVE, SUITE 3000				T 4 DDDCCC			l
CITY-ST-ZIP	MIAMI FL 33131	2 0000		T ADDRESS			
TITLE	THE WILL CO TO !	DELETE	1.4 CITY - 2.1 TITLE	SI-ZIP		Change	Addition
NAME				1		Change	Audilion
			22 NAME		•	••	ĺ
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TITLE		C DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STAEE	ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CITY-	ST-ZIP			
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NAME			4. 2 NAME				
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CITY-ST-ZIP			4.4 CITY - 9	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
ÇITY-ST-ZIP			5.4 CITY - 3				
TITLE		DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	}			
STREET ADDRESS		// 1	6.3 STREET	Anorese			
CITY-ST-ZIP			6.4 CITY-5				
	ertify that the information supplie	d with this filing does not auxilify for	or the exemn	otion stated i	n Section 119.07(3)(i), Florida Statutes. I furt	ther certify that th	e information
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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 surfusion empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address