

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000048554 (4)

1. Corporation Name
DIGIHOST, INC.

DIVISION OF CORPORATIONS
TALLAHASSEE, FL



Principal Place of Business

15151 BRIGHTON LANE
DAVIE FL 33331

Mailing Address

15151 BRIGHTON LANE
DAVIE FL 33331

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1997

2. Principal Place of Business

21 10030 W McNAB ROAD

Suite, Apt. #, etc.

22 City & State
TAMARAC FL

23 Zip
33321

Country

24 BROWARD

2a. Mailing Address

26 10030 W McNAB ROAD

Suite, Apt. #, etc.

27 City & State
TAMARAC FL

28 Zip
33321

Country

29 BROWARD

30 BROWARD

4. FEI Number

65-0853897

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GOLDSTEIN, MARK B
1000 SOUTH FEDERAL HIGHWAY, SUITE 201
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name
DAVID GEIER
82 Street Address (P.O. Box Number is Not Acceptable)
15151 BRIGHTON LANE
83
84 City
DAVIE FL 85 Zip Code
33331

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]

7/16/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GEIER, DAVID
STREET ADDRESS 15151 BRIGHTON LANE
CITY-ST-ZIP DAVIE FL 33331

TITLE D ☒ DELETE

NAME GOLDSTEIN, MARK B
STREET ADDRESS 1000 SOUTH FEDERAL HIGHWAY
CITY-ST-ZIP FORT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

300002632063
-09/04/98--01047--042
***550.00

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 changed, or on an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

7/16/98

CR2E034 (5/98)