2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P97000062463

1. Entity Name

A. PIX DIGITAL POST GROUP, INC.



FILED Mar 03, 2003 8:00 am Secretary of State

03-03-2003 90445 006 ***150.00

Principal Place of Business
625-D HERNDON AVENUE
ORLANDO FL 32803

Mailing Address

625-D HERNDON AVENUE

ORLANDO F		ORLANDO FL 32803				
341.	Place of Business, 5 LAILE HOOSE Pd	3. Mailing Address 5415 LAKE	Howall Pd			
Suite, Apt. #, etc. Suite, Apt. #, etc. # 224				CHECK HERE IF	CHECK HERE IF MAKING CHANGES	
Winte	In Park PL	City & State Ru	nk FL	4. FEI Number 59-3457773	Applied For Not Applicable	
321	792 Country	Zip 32792	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Reg	stered Agent	
HODDON			Name 7	y terre, geologista, mai a la la geo		
	V, CAROL		Street Address	OS (BO Boy Number in Not Assessable)		
	ERNDUN AVENUE		5415	ss (P.O. Box Number is Not Acceptable) LAILE HOWEU RO	#224	
OPLAND	O FL 32888					
			City		7 7 0 d	
			WW	Herrark	FL 32792	
8. The above	e named entity submits this statement for	the purpose of changing its r	egistered office or regis	tored agent, or both in the State of Florid	a. I am familiar with, and accept	
trie obliga	tions of registered agent.			r,	.	
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	AROL MO Registered Agent signature requ	noww Pres. ired when reinstating)	2/28/03 DATE	
	ILE NOW!!! FEE IS \$150.00		A. A.,	O Floring Committee Fin		
	r May 1, 2003 Fee will be \$550.00			 Election Campaign Finance Trust Fund Contribution. 	cing \$5.00 May Be ☐ Added to Fees	
*-	k Payable to Florida Department of S			Most Ford Contribution.	Added to rees	
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 11	
TITLE	PD ANDROW CARD	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	MORROW, CAROL		NAME		1	
STREET ADDRESS	2175 HUNTERFIELD ROAD		STREET ADDRESS			
CITY-ST-ZIP	MAITLAND FL 32751		CITY-ST-ZIP		İ	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE .		Delete	- HITLE		Change Addition	
NAME			NAME		- Contained Invitation	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME		C Desete	NAME		☐ Change ☐ Addition	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE			5 01 2.11		1	
		☐ Delete	TITLE		☐ Change ☐ Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

☐ Delete

☐ Change

Addition