FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700063019

1. Corporation Name

Principal Place of Business

CYBERDOT DIGITAL GRAPHICS, INC.

FILED
Jun 01, 1999 8:00 am
Secretary of State
06.01.1000.00049.004.***150.00



1314 CORAL W. MIAMI FL 33145 US		1314 CORAL WAY Miami FL 33145 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/17/1997				
Principal Place of Business 2a. Mailing Address				_	4. FEI Number	T	Applied For		
1				65-0774020		Not Applicable			
Suite, Apt. i	Suite, Apt. #, etc. Suite, Apt. #, etc.					T -			
City & State	y & State City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip 24	Country 25		ountry	,			□No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
81 Name									
VEGA. ANA C 1614 EU CLID AVE #24			82	82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI BCH FL 33139			83						
			84	City	Fi	85 Zi	p Code		
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State o	2a. Mailing Address 4. FEI Number							
12.	OFFICERS AND	DIRECTORS 13	3.						
TITLE	D	☐ DELETE 1.1	TITLE		Mr. a o coli	Chang	e Addition		
NAME	VEGA, ANA C	1.2	NAME		PAVEL KEDIN	10:101	1 DOWN 3		
STREET ADDRESS	1614 EU CLID AVE #24	1.3	STREET	TADDRESS	1614 Evelid ave #34 1111	· () · (BENCI		
CITY-ST-ZIP	MIAMI BCH FL 33139		CITY-S	T-ZIP	FC 33139				
TITLE	SM				L	_ Chang	je L Addition (
NAME	MORALES, ALEXANDER	2.2	NAME						
STREET ADDRESS	1614 EUCLID AVE #34	.		- 1					
CITY-ST-ZIP	MIAMI BCH FL 33139	· 		ST-ZIP		7 Chann	a		
TITLE					Ļ	Johans	ge [] Addition		
NAME									
STREET ADDRESS			-						
CITY-ST-ZIP		· ·		ST-ZIP	F	Chang	e 🗀 Addition		
TITLE					_		, _		
NAME STREET ADDRESS				T AMDRESS					
1									
CITY-ST-ZIP TITLE				1,2"		Chang	ge Addition		
NAME									
STREET ADDRESS		5.3	STREET	T ADDRESS					
CITY-ST-ZIP		5.4	CITY-S	T-ZIP					
TITLE		☐ DELETE 6.1	TITLE	j		Chang	ge Addition		
NAME		6.2	NAME						
STREET ADDRESS		6.3	STREET	TADORESS					

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, with all other like empowered.