2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000069062

Entity Name: DIGITEMP SYSTEMS, INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2539 OLD OKEECHOCEE ROAD SUITE 3 WEST PALM BEACH, FL 33409 **New Mailing Address: Current Mailing Address:** 2539 OLD OKEECHOCEE ROAD SUITE 3 WEST PALM BEACH, FL 33409 FEI Number: 65-0773384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHOLIN, CHRISTIAN N 505 SOUTH FLAGLER DRIVE WEST PALM BEACH, FL 33401 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KUUTTI, TOM Name: Name: 2539 OLD OKEECHOBEE ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: () Delete ٧S Title: Title: () Change () Addition Name: OLSSON, JORMA Name: 2539 OLD OKEECHOBEE ROAD Address: Address: WEST PALM BEACH, FL 33409 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete SARVELA, JRAKKO SARVELA, JAAKKO Name: Name: 2539 OLD OKEECHOBEE ROAD 2539 OLD OKEECHOBEE ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM KUUTTI P 05/01/2002