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FILED
May 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000100460 (9)

1. Corporation Name

DIGIPRINT OF MIAMI, INC.



Principal Place of Business

720 NW 27 AVE
SUITE 104
MIAMI FL 33125

Mailing Address

720 NW 27 AVE
SUITE 104
MIAMI FL 33125

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1997

4. FEI Number

65-0802980

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

LEY, RAUL
720 NW 27 AVE
SUITE 104
MIAMI FL 33125

10. Name and Address of New Registered Agent

81 Name

LEONEL LEY

82 Street Address (P.O. Box Number is Not Acceptable)

720 NW 27 AV

83

STE 104

84 City

MIAMI

FL

85 Zip Code

33125

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 hereby sworn, and accept the obligations of Section 607.0506, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

LEY, LEONEL

STREET ADDRESS

13486 SW 12TH LANE

CITY- ST- ZIP

MIAMI FL 33184

TITLE

D

NAME

LEY, RAUL

STREET ADDRESS

13486 SW 12TH LANE

CITY- ST- ZIP

MIAMI FL 33184

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

PRESIDENT

12 NAME

LEY, LEONEL

13 STREET ADDRESS

720 N.W. 27 AV #104

14 CITY- ST- ZIP

MIAMI FL 33125

21 TITLE

V.P.

22 NAME

LEY, RAUL

23 STREET ADDRESS

720 NW 27 AV #104

24 CITY- ST- ZIP

MIAMI FL 33125

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

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]

4/20/98

CR2E034 (10/97)