## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 05, 2004 08:00 AM Secretary of State

DOCUMENT # P99000 1. Entity Name DIGITAL DATA WORKS INC.		
Principal Place of Business	Mailing Address	
2342-42ND STREET S.W. Naples, Fl. 34116	2342-42ND STREET S.W. Naples, FL 34116	

DO NOT WRITE IN THIS SPACE

 23 Marson martit banki :	 	

 04282004
 No Chg-P
 CR2E034 (10/03)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and	Address	of Currer	t Registe	red Agent

LIGHTNER, CAROLYN R 2342 42ND STREET SW NAPLES, FL 34116

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent and title	t applicable. (NOTE Registered	Agent signature	e required when reinstating)	DATE	
		\$5.00 May Be Added to Fees	::::::::::::::::::::::::::::::::::::::			
10.	OFFICERS AND DIREC	CTORS			·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGHTNER, CAROLYN R 2342-42ND STREET S.W. NAPLES, FL 34116					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated	ertify that the information supplied with this fill on this report or supplemental report is true a	ling does not qualify for the exer and accurate and that my signate	nption state ure shall hav	d in Section 119.07(3) ve the same legal effe	(i). Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director	