

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076607

1. Entity Name

DIGITAL DYNAMIC DISPLAYS CORP.

**FILED**  
**May 13, 2000 8:00 am**  
**Secretary of State**

05-13-2000 90022 015 \*\*\*150.00

Principal Place of Business

1650 NORTHWEST 66TH AVENUE  
 PLANTATION FL 33313

Mailing Address

1650 NORTHWEST 66TH AVENUE  
 PLANTATION FL 33313-4539

2. Principal Place of Business

1500 NW 3rd Street

3. Mailing Address

SAME

Suite, Apt. #, etc.

#106

Suite, Apt. #, etc.

City & State

DEERFIELD BEACH

City & State

Zip

FL 33442

Country

FL/USA

Zip

Country

4. FEI Number

65-0989880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE PD  
 NAME VAN HORN, WILLIAM  
 STREET ADDRESS 1650 NORTHWEST 66TH AVENUE  
 CITY-ST-ZIP PLANTATION FL 33313 ☐ Delete

TITLE SV  
 NAME BEZIERE, CATHERINE  
 STREET ADDRESS 1650 NORTHWEST 66TH AVENUE  
 CITY-ST-ZIP PLANTATION FL 33313 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BEZIERE CATHERINE

Date

4/26/00 (954) 570-1414

Daytime Phone #