

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000100307

1. Entity Name

THE DIGITAL DESIGN FACTORY, INC.

FILED

Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90014 017 ***550.00

Principal Place of Business

1500 BAY ROAD, SUITE 854
MIAMI BEACH FL 33139

Mailing Address

1500 BAY ROAD, SUITE 854
MIAMI BEACH FL 33139

2. Principal Place of Business

1500 BAY ROAD
Suite Apt. #, etc. 1520-S

3. Mailing Address

1500 BAY ROAD
Suite Apt. #, etc. 1520-S

City & State

MIAMI BEACH, FL.

City & State

MIAMI BEACH, FL.

4. FEI Number

65-0992544

Applied For

Not Applicable

Zip

33139

Country

U.S.A.

Zip

33139

Country

U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIRACUSA, JOSEPH M

1500 BAY ROAD, SUITE 854
MIAMI BEACH FL 33139

SAME
Agent
Wrong
Suite
Number.

7. Name and Address of New Registered Agent

Name SIRACUSA, Joseph M.

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

1500 BAY ROAD
Suite 1520-S

City MIAMI BEACH

FL

Zip Code 33139

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)

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FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT - CURRENT ☐ Change ☐ Addition
NAME Joseph M. SIRACUSA
STREET ADDRESS 1500 BAY ROAD, Suite 1520-S
CITY-ST-ZIP Miami Beach, FL. 33139

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 REQUIRED - Joseph M. SIRACUSA Sept 12, 2000 305-604-5713

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)