

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # S94787**

1. Entity Name  
**DIGITREND CORP.**



**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business  
**1331 BANYAN WAY**  
**WESTON, FL 33327 US**

Mailing Address  
**P O BOX 266226**  
**WESTON, FL 33326 US**



01222008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0297086**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**NAVARRO, ADRIANA V.**  
**1331 BANYAN WAY**  
**WESTON, FL 33327**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

000000796247  
01/23/08-80024-019 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NAVARRO, ADRIANA V 1331 BANYAN WAY WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NAVARRO, ADRIANA V. 1331 BANYAN WAY WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ERCOLE, AUGUSTO 1331 B ANYAN WAY WESTON, FL 33327
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** **ADRIANA NAVARRO**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/22/08** **(954) 3284437**  
Date Daytime Phone