

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026391

FILED  
Feb 04, 2011  
Secretary of State

Entity Name: S2S DIGITAL, INC.

**Current Principal Place of Business:**

5523 WEST CYPRESS BLVD  
SUITE 100  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

5523 WEST CYPRESS BLVD  
SUITE 100  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 51-0497244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CASTELLON, ORQUIDEA E  
553 JOHN PASS AVENUE  
MADEIRA BEACH, FL 33708      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MEHLTRETTER, SARA J  
Address: 16124 4TH ST. E  
City-St-Zip: REDINGTON BEACH, FL 33708

Title: D  
Name: CASTELLON, ORQUIDEA E  
Address: 553 JOHNS PASS AVENUE  
City-St-Zip: MADEIRA BEACH, FL 33708

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ORQUIDEA E CASTELLON

D

02/04/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date