

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003517

FILED
May 05, 2005
Secretary of State

Entity Name: DIGITAL PRODUCTIONS & DESIGN, INC.

Current Principal Place of Business:

13810 YARMOUTH DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

645 LAKE WELLINGTON DRIVE
WELLINGTON, FL 33414

Current Mailing Address:

13810 YARMOUTH DRIVE
WELLINGTON, FL 33414

New Mailing Address:

645 LAKE WELLINGTON DRIVE
WELLINGTON, FL 33414

FEI Number: 03-0500197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALLEN, HOWARD M
13810 YARMOUTH DRIVE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

FALLEN, HOWARD M
645 LAKE WELLINGTON DRIVE
WELLINGTON, FL 33414 US

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:

05/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FALLEN, HOWARD M
Address: 13810 YARMOUTH DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FALLEN, HOWARD M
Address: 645 LAKE WELLINGTON DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: S () Change (X) Addition
Name: FALLEN, BRYANNA L
Address: 645 LAKE WELLINGTON DRIVE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOWARD FALLEN

P

05/05/2005

Electronic Signature of Signing Officer or Director

Date