

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000100030

Entity Name: DETAIL DYNAMICS, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

500 SOUTH ORANGE BLVD.
SANFORD, FL 32771

New Principal Place of Business:

222 HICKMAN DR.
SUITE 102
SANFORD, FL 32771

Current Mailing Address:

500 SOUTH ORANGE BLVD.
SANFORD, FL 32771

New Mailing Address:

222 HICKMAN DR.
SUITE 102
SANFORD, FL 32771

FEI Number: 59-3478410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, PAMELA A
5545 WILSON ROAD
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

OLSON, PAMELA A
500 SOUTH ORANGE BLVD
SANFORD, FL 32771 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: PAM OLSON

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OLSON, PAMELA A
Address: 5545 WILSON ROAD
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: OLSON, PAMELA A
Address: 500 SOUTH ORANGE BLVD
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PAM OLSON

DP

04/28/2008

Electronic Signature of Signing Officer or Director

Date