

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 584831

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: DIGITAL LIGHTING SYSTEMS, INC.

## Current Principal Place of Business:

12302 SW 128 COURT  
105  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

12302 SW 128 COURT  
105  
MIAMI, FL 33186

## New Mailing Address:

FEI Number: 59-1892964      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KHAWAND, ELIAS  
11 SW 136TH CT  
MIAMI, FL 33184      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: KHAWAND, ELIAS PS  
Address: 11 SW 136 COURT  
City-St-Zip: MIAMI, FL 33184

Title: VP ( ) Delete  
Name: KHAWAND, SALWA  
Address: 11 SW 136TH CT  
City-St-Zip: MIAMI, FL 33184

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ELIAS KHAWAND

PS

01/03/2008

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

\_\_\_\_\_  
Date