

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 661050

FILED  
Apr 14, 2006  
Secretary of State

Entity Name: DIRECTORY ADVERTISING SPECIALISTS, INC.

## Current Principal Place of Business:

6565 TAFT ST  
201  
HOLLYWOOD, FL 33024 US

## New Principal Place of Business:

## Current Mailing Address:

6565 TAFT ST  
201  
HOLLYWOOD, FL 33024 US

## New Mailing Address:

FEI Number: 59-2071769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARSONS, JOSEPH L  
6565 TAFT ST., STE 201  
HOLLYWOOD, FL 33024 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: PDST ( ) Delete  
Name: PARSONS, JOSEPH L.  
Address: 6565 TAFT ST STE 201  
City-St-Zip: HOLLYWOOD, FL 33024

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: PARSONS, CHRISTINA M  
Address: 6565 TAFT ST STE 201  
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP ( ) Change (X) Addition  
Name: KORNER, KAREN A  
Address: 6565 TAFT ST STE 201  
City-St-Zip: HOLLYWOOD, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH L PARSONS

PDST

04/14/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date