2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003667

Entity Name: DCN SALES, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1287 NEWPORT CENTER DRIVE, SUITE 203 3260 NW 23RD AVE

DEERFIELD BEACH, FL 33442 # 800

POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

3260 NW 23RD AVE 1287 NEWPORT CENTER DRIVE, SUITE 203

DEERFIELD BEACH, FL 33442 #800

POMPANO BEACH, FL 33069

FEI Number: 38-3410852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RICH, HOWARD RICH, HOWARD L PRES. 1287 NEWPORT CENTER DRIVE, SUITE 203 3260 NW 23RD AVE

DEERFIELD BEACH, FL 33442 # 800

POMPANO BEACH, FL 33069 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: HOWARD L RICH 03/24/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

DEERFIELD BEACH, FL 33442

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

POMPANO BEACH, FL 33069

Title: () Delete Title: () Change () Addition

CZEISZPERGER, GEORGE Name: Name: 125 BELLEVIEW Address: Address: City-St-Zip: NT. CLEMENS, MI 48043 City-St-Zip:

PD Title: PD (X) Change () Addition Title: () Delete

RICH, HOWARD RICH, HOWARD Name: Name:

1287 NEWPORT CENTER DRIVE, SUITE 203 3260 NW 23RD AVE # 800 Address: Address: DEERFIELD BEACH, FL 33442 POMPANO BEACH, FL 33069 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title:

LAXER, SHELDON Name: LAXER, SHELDON Name: 1287 NEWPORT CENTER DRIVE, SUITE 203 Address: 3260 NW 23RD AVE # 800 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.

City-St-Zip:

SIGNATURE: HOWARD L RICH **PRES** 03/24/2009