

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002456

FILED
Apr 10, 2008
Secretary of State

Entity Name: BRIJOT IMAGING SYSTEMS, INC.

Current Principal Place of Business:

5422 CARRIER DR
SUITE 107
ORLANDO, FL 32819 US

Current Mailing Address:

5422 CARRIER DR
SUITE 107
ORLANDO, FL 32819 US

New Principal Place of Business:

1064 GREENWOOD BOULEVARD
SUITE 124
LAKE MARY, FL 32746 US

New Mailing Address:

1064 GREENWOOD BOULEVARD
SUITE 124
LAKE MARY, FL 32746 US

FEI Number: 20-1003309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: HAMMOND, RON
Address: 1221 BRICKELL AVENUE, 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: D () Delete
Name: NAVARRO, JUAN
Address: 1221 BRICKELL AVENUE, 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: S () Delete
Name: CHOULJIAN, GREGORY
Address: 1221 BRICKELL AVENUE - 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: DPCE () Delete
Name: LASKEY, MITCHEL J
Address: 1221 BRICKELL AVENUE - 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: D () Delete
Name: NEWLAND, ROSS
Address: 1221 BRICKELL AVENUE - 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

Title: D () Delete
Name: CHAO, MARCELO
Address: 1221 BRICKELL AVENUE - 22ND FLOOR
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: GREGORY CHOULJIAN

S

04/10/2008

Electronic Signature of Signing Officer or Director

Date