2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# F05000004439

Entity Name: DRIVESOL WORLDWIDE HOLDING CORP.

Current Principal Place of Business:

5200 TOWN CENTER CIRCLE, SUITE 470
BOCA RATON, FL 33486

New Principal Place of Business:

1104 WEST MAPLE ROAD
TROY, MI 48084

Current Mailing Address:

5200 TOWN CENTER CIRCLE, SUITE 470
BOCA RATON, FL 33486

New Mailing Address:

1104 WEST MAPLE ROAD
TROY, MI 48084

FEI Number: 20-3087756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: DV ( ) Delete
Name: BLECHMAN, DAVID
Address: 375 PARK AVENUE, SUITE 1302
City-St-Zip: NEW YORK, NY 10152

Title: DV ( ) Delete
Name: GILLEN, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: VAS ( ) Delete
Name: MCCONVERY, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: V ( ) Delete
Name: TALARICO, GARY
Address: 375 PARK AVENUE, SUITE 1302
City-St-Zip: NEW YORK, NY 10152

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VAS (X) Change ( ) Addition
Name: BLECHMAN, DAVID
Address: 375 PARK AVENUE, SUITE 1302
City-St-Zip: NEW YORK, NY 10152

Title: DV (X) Change ( ) Addition
Name: GILLEN, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486

Title: VAS (X) Change ( ) Addition
Name: MCCONVERY, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 600
City-St-Zip: BOCA RATON, FL 33486

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

Title: CEO ( ) Change (X) Addition
Name: SIMON, MARK
Address: 1104 WEST MAPLE ROAD
City-St-Zip: TROY, MI 48084

Title: CFO ( ) Change (X) Addition
Name: TRUYENS, NICHOLAS
Address: 1104 WEST MAPLE ROAD
City-St-Zip: TROY, MI 48084

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: NICHOLAS TRUYENS CFO 04/30/2008

Electronic Signature of Signing Officer or Director — Date