2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001460

Entity Name: DIALOGUEDIRECT. INC

FILED Jul 10, 2007 Secretary of State

Entity Name. DIALOGOEDIRECT, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
455 BROADWAY, 2ND FLOOR NEW YORK, NY 10013				3 EAST 28TH STREET 4TH FLOOR NEW YORK, NY 10016			
Current Mailing Address:				New Mailing Address:			
455 BROADWAY, 2ND FLOOR NEW YORK, NY 10013			3 EAST 28TH STREET 4TH FLOOR NEW YORK, NY 10016				
FEI Number: 01-0772071 FEI Number Applied For () FEI Num			mber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
1200 S. PIN PLANTATION The above in the State	of Florida.	US	pose o	f changing it	ts registered o	office or registered agent, or both,	
SIGNATURE:Electronic Signature of Registered Agent					 Date		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior no Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:						TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ()[LEITNER, ANDR 455 BROADWAY NEW YORK, NY	, 2ND FLOOR		Title: Name: Address: City-St-Zip:	LEITNER, AND	STREET, 4TH FLOOR	
Title: Name: Address: City-St-Zip:	DT () I BUCHHAUS, ROI 455 BROADWAY NEW YORK, NY	, 2ND FLOOR		Title: Name: Address: City-St-Zip:	BUCHHAUS, R	STREET ,4TH FLOOR	
Title: Name: Address: City-St-Zip:	P ()[WATKINS, OWE 455 BROADWAY NEW YORK, NY	, 2ND FLOOR		Title: Name: Address: City-St-Zip:	WATKINS, OW	STREET, 4TH FLOOR	
Title: Name: Address: City-St-Zip:	VS ()[TAYLOR, PETRA 455 BROADWAY NEW YORK, NY	, 2ND FLOOR		Title: Name: Address: City-St-Zip:	D T (X ROLKA, RYSZ 60-23 60TH AV MASPETH, NY	'ENUE	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	DS (MANDELL, DAI 68 BELVEDER YONKERS, NY	E DRIVE	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	DARDIS, DEBE	STREET, 4TH FLOOR	

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: DANIEL MANDELL DS 07/10/2007