

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079296

Entity Name: DIGITAL SIGNAGE SOLUTIONS, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

660 LINTON BLVD.
SUITE 217
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

660 LINTON BLVD.
SUITE 217
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 20-3341579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASPARI, CHARLES ESQ.
660 LINTON BLVD.
SUITE 217
DELRAY BEACH, FL 33444 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ILARDI, FRED
Address: 660 LINTON BLVD., SUITE 217
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: MGR () Delete
Name: PELLIZZARI, JOHN
Address: 660 LINTON BLVD., SUITE 217
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: DEIXLER, STEPHEN
Address: 660 LINTON BLVD., SUITE 217
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: MGR () Delete
Name: GASPARI, CHARLES
Address: 660 LINTON BLVD., SUITE 217
City-St-Zip: DELRAY BEACH, FL 33444 US

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPHEN DEIXLER

MR

04/28/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date