2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079296

Entity Name: DIGITAL SIGNAGE SOLUTIONS, LLC

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

660 LINTON BLVD. 371 EAGLE DR

SUITE 217 JUPITER, FL 33477 US DELRAY BEACH, FL 33444 US

Current Mailing Address: New Mailing Address:

660 LINTON BLVD. 371 EAGLE DR

SUITE 217 JUPITER, FL 33477 US DELRAY BEACH, FL 33444 US

FEI Number: 20-3341579 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:

GASPARI, CHARLES ESQ.

660 LINTON BLVD.

371 EAGLE DR

SUITE 217 JUPITER, FL 33477 US DELRAY BEACH, FL 33444 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: STEPHEN DEIXLER 04/23/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 ILARDI, FRED
 Name:
 DEIXLER, STEPHEN

 Address:
 660 LINTON BLVD., SUITE 217
 Address:
 371 EAGLE DR

 City-St-Zip:
 DELRAY BEACH, FL 33444 US
 City-St-Zip:
 JUPITER, FL 33477 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: PELLIZZARI, JOHN Name: PELLIZZARI, JOHN

 Name:
 PELLIZZARI, JOHN
 Name:
 PELLIZZARI, JOHN

 Address:
 660 LINTON BLVD., SUITE 217
 Address:
 50 SOUTHFIELD DR.

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:
 BELLE MEAD, NJ 08502

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

 Name:
 DEIXLER, STEPHEN
 Name:
 ILARDI, FRED

 Address:
 660 LINTON BLVD., SUITE 217
 Address:
 14 ROSEDALE AVE.

 City-St-Zip:
 DELRAY BEACH, FL 33444 US
 City-St-Zip:
 CLIFTON, NJ 07013 US

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

 Name:
 GASPARI, CHARLES
 Name:

 Address:
 660 LINTON BLVD., SUITE 217
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33444 US
 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 MGRM 04/23/2007