

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # L05000079296

1. Entity Name
DIGITAL SIGNAGE SOLUTIONS, LLC



Principal Place of Business
371 EAGLE DR
JUPITER, FL 33477 US

Mailing Address
371 EAGLE DR
JUPITER, FL 33477 US



04152008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3341579	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEIXLER, STEPHEN
371 EAGLE DR
JUPITER, FL 33477

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

000000005519
05/05/08-80001-018 138.75

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEIXLER, STEPHEN 371 EAGLE DR JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PELLIZZARI, JOHN 50 SOUTHFIELD DR. BELLE MEAD, NJ 08502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ILARDI, FRED 14 ROSEDALE AVE. CLIFTON, NJ 07013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STEPHEN M DEIXLER 4-15-08

Date

Daytime Phone #

561-714-7876(C)
561-744-7434(C)