## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2007 08:00 AM Secretary of State DOCUMENT # M38166 DEZER ADVERTISING, INC. Principal Place of Business Mailing Address 18001 COLLINS AVE. 18001 COLLINS AVE. 31ST FLR. 31ST FLR. SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160 No Chg-P 04182007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIELDSTONE, RONALD R DO NOT WRITE 201 ALHAMBRA CIRCLE CORAL GABLES, FL 33134 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Election Campaign Financing 05/17/07-80003-006 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME DEZER, MICHAEL STREET ADDRESS 89 FIFTH AVE CITY-ST-ZIP NEW YORK, NY TITLE DST DEZERTZOV, NAOMI NAME STREET ADDRESS 89 FIFTH AVE CITY-ST-ZIP NEW YORK, NY STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-7IP

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