

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085936

FILED
Jul 05, 2006
Secretary of State

Entity Name: DTS DIRECT MAIL AND FULFILLMENT SERVICES, INC.

Current Principal Place of Business:

5800 MIAMI LAKES DRIVE
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

200 CIRCLE CIRCLE
PISCATAWAY, NJ 08854

New Mailing Address:

FEI Number: 22-3754570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, DERMOT JR.
5800 MIAMI LAKES DRIVE
MIAMI LAKES, FL 33014 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STONACK, TERRIE
Address: 86-53 VIA REALE #3
City-St-Zip: BOCA RATON, FL

Title: T () Delete
Name: DEOCHAN, SHIRLEY
Address: 2135 NORMAND DR
City-St-Zip: MIAMI BEACH, FL

Title: T () Delete
Name: ZAMMIT, CHARLES
Address: 375 GURLEY AVENUE
City-St-Zip: STATEN ISLAND, NY

Title: S () Delete
Name: CERESA, DONNA
Address: 2433 5TH STREET
City-St-Zip: EAST MEADOW, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CHRISTOPHER TRAINOR

CFO

07/05/2006

Electronic Signature of Signing Officer or Director

Date