

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039715

FILED
May 03, 2005
Secretary of State

Entity Name: DUOLOGICA CORPORATION

Current Principal Place of Business:

5346 WILLIS AVENUE
SHERMAN OAKS, CA 91411 US

New Principal Place of Business:

8 PARKWAY W
MOUNT VERNON, NY 10552 US

Current Mailing Address:

5346 WILLIS AVENUE
SHERMAN OAKS, CA 91411 US

New Mailing Address:

8 PARKWAY W
MOUNT VERNON, NY 10552 US

FEI Number: 65-1098444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VISCARRA, DIANA
2856 SW 177 TERR
MIRAMAR, FL 33029 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FERRER, ALBERTO J
Address: 5346 WILLIS AVENUE
City-St-Zip: SHERMAN OAKS, CA 91411 US

Title: VD () Delete
Name: FERRER, BETHANY B
Address: 5346 WILLIS AVENUE
City-St-Zip: SHERMAN OAKS, CA 91411 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FERRER, ALBERTO J
Address: 8 PARKWAY W
City-St-Zip: MOUNT VERNON, NY 10552 US

Title: VD (X) Change () Addition
Name: FERRER, BETHANY B
Address: 8 PARKWAY W
City-St-Zip: MOUNT VERNON, NY 10552 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALBERTO FERRER

PSTD

05/03/2005

Electronic Signature of Signing Officer or Director

Date