

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90015 020 ***150.00

DOCUMENT # P01000053283 1. Entity Name DIGITAL IMPRESSIONS OF MIAMI, INC.					
Principal Place of Business 7132 S.W. 47TH STREET MIAMI, FL 33155			Mailing Address 7132 S.W. 47TH STREET MIAMI, FL 33155		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
01262006 Chg-P CR2E034 (11/05)			4. FEI Number 65-1108327		
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			Applied For Not Applicable		
6. Name and Address of Current Registered Agent ZEDAN, BORIS 7132 S.W. 47TH STREET MIAMI, FL 33155			7. Name and Address of New Registered Agent Name Gadala Zedan Street Address (P.O. Box Number is Not Acceptable) 372 S.W. 187th Terrace City Pembroke Pines FL Zip Code 33029		
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: (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZEDAN, BORIS 11030 N.W. 48TH TERR MIAMI, FL 33178	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ZEDAN, ESTUARDO 9431 N.W. 45TH ST. MIAMI, FL 33178	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gadala Zedan 372 S.W. 187th Terrace Pembroke Pines, FL 33029	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gadala Zedan 372 S.W. 187th Terrace Pembroke Pines, FL 33029	<input type="checkbox"/> Delete <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gadala Zedan 372 S.W. 187th Terrace Pembroke Pines, FL 33029	<input type="checkbox"/> Delete <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Gadala Zedan 372 S.W. 187th Terrace Pembroke Pines, FL 33029	<input type="checkbox"/> Delete <input type="checkbox"/> Addition			
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.					
SIGNATURE: Jan 30 2006 305-663 3226					