2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071343

US

Entity Name: DIGITAL IMAGING TONER TECHNOLOGIES, INC.

FILED Mar 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4051 S.W. 47TH AVE. 20841 JOHNSON ST. BLDG. 103

SUITE 106 BLDG. 103

DAVIE, FL 33314 US PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

P.O. BOX 290895 DAVIE, FL 33329

FEI Number: 65-1124301 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANCHEZ, ELKIN

4051 SW 47TH AVE

20841 JOHNSON ST. BLDG. 103

SUITE 106 BLDG.103

DAVIE, FL 33314 US PEMBROKE PINES, FL 33329 US

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: ELKIN SANCHEZ 03/22/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SANCHEZ, ELKIN
 Name:
 SANCHEZ, ELKIN

 Address:
 4051 S.W. 47TH AVE. STE.106
 Address:
 20841 JOHNSON ST. BLDG. 103

City-St-Zip: DAVIE, FL 33314 City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP () Delete Title: VP (X) Change () Addition Name: SCHEGHERASTEIN, RIANO Name: SCHEGHERASTEIN, RIANO

 Address:
 4051 S.W. 47TH AVE. STE.106
 Address:
 20841 JOHNSON ST. BLDG. 103

 City-St-Zip:
 DAVIE, FL 33314
 City-St-Zip:
 PEMBROKE PINES, FL 33029

 $\label{eq:title: VP (X) Change () Addition} \begin{tabular}{ll} Title: & VP & (X) Change () Addition \\ \end{tabular}$

Name: SANCHEZ, WILLIAM Name: SANCHEZ, WILLIAM

Address: 4051 SW 47TH AVE STE 106 Address: 20841 JOHNSON ST. BLDG. 103 City-St-Zip: FORT LAUDERDALE, FL 33314 City-St-Zip: PEMBROKE PINES, FL 33029

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: ELKIN SANCHEZ PRES 03/22/2007