2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071343

Entity Name: DIGITAL IMAGING TONER TECHNOLOGIES, INC.

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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20841 JOHNSON ST. BLDG. 103 20861 JOHNSON ST.

BLDG. 103 BLDG. 103

PEMBROKE PINES, FL 33029 US PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

P.O. BOX 290895 20861 JOHNSON ST.

DAVIE, FL 33329 US BLDG. 103

PEMBROKE PINES, FL 33029 US

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
20841 JOHNSON ST. BLDG. 103
20861 JOHNSON ST.

BLDG.103 BLDG.103

PEMBROKE PINES, FL 33329 US PEMBROKE PINES, FL 33029 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 04/21/2008

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:
 20841 JOHNSON ST. BLDG. 103
 Address:
 20861 JOHNSON ST. BLDG 103

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

Title: VΡ Title: VΡ (X) Change () Addition () Delete SCHEGHERASTEIN, RIANO SCHEGHERASTEIN, RIANO Name: Name: 20841 JOHNSON ST. BLDG. 103 20861 JOHNSON ST. BLDG.103 Address: Address: PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip:

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

Name: SANCHEZ, WILLIAM Name: SANCHEZ, WILLIAM

 Address:
 20841 JOHNSON ST. BLDG. 103
 Address:
 20861 JOHNSON ST. BLDG. 103

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

I hereby certify that the information supplied with this filing does not qualify 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 04/21/2008