2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076086

Entity Name: DMI MEETINGS, INC.

FILED Apr 28, 2005 Secretary of State

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

100 EAST LINTON BLVD 100 EAST LINTON BLVD

SUITE 121-B SUITE 411-B

DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

Current Mailing Address: New Mailing Address:

100 EAST LINTON BLVD 100 EAST LINTON BLVD SUITE 121-B SUITE 411-B

DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

FEI Number: 65-1130527 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:

DUPONT, COLLEEN
2105 SPRING HARBOR DRIVE
SUITE I

DUPONT, COLLEEN
163 SEMINOLE LANE
BOCA RATON, FL 33487 US

DELRAY BEACH, FL 33445 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: COLLEEN DUPONT 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: DUPONT, COLLEEN Name: DUPONT, COLLEEN

Address: 100 EAST LINTON BLVD - SUITE 121-B Address: 100 EAST LINTON BLVD - SUITE 411-B

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

Title: BM () Delete Title: BM (X) Change () Addition Name: JOHNSON, PARVIN J JR Name: JOHNSON, PARVIN J JR

Address: 100 EAST LINTON BLVD - SUITE 121-B Address: 100 EAST LINTON BLVD - SUITE 411-B

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

Name: DUPONT, ANTOINE Name: DUPONT, ANTOINE

Address: 100 EAST LINTON BLVD - SUITE 121-B Address: 100 EAST LINTON BLVD - SUITE 411-B

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

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: COLLEEN DUPONT VPST 04/28/2005