2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133418

FILED
Mar 20, 2012
Secretary of State

Entity Name: DEI HEADQUARTERS, INC.

Current Principal Place of Business:

1 VIPER WAY
VISTA, CA 92081 US

New Principal Place of Business:

1 VIPER WAY
C/O MICHAEL S. SIMMONS
VISTA, CA 92081 US

Current Mailing Address:

1 VIPER WAY
C/O MICHAEL S. SIMMONS
VISTA, CA 92081 US

New Mailing Address:

FEI Number: 81-0587470 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: PCFO
Name: DUFFY, KEVIN P
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: EVPS
Name: SIMMONS, MICHAEL S
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: CEO
Name: MINARIK, JAMES E
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: VP
Name: SMITH, MICHAEL N
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: T
Name: BROCKMAN, DAN
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: AS
Name: BIGGS, CRYSTAL L
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL S. SIMMONS EVPS 03/20/2012
Electronic Signature of Signing Officer or Director Date