2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077958

Entity Name: DIGITAL SHOCK DESIGN, INC.

FILED Feb 20, 2005 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
	124TH AVENI PRINGS, FL 33		US			BOTH PLACE BEACH, F		US	
Current Mailing Address:					New Mailing Address:				
	124TH AVENI PRINGS, FL 33		US			80TH PLACE) BEACH, F		US	
FEI Number:	14-1889827	FEIN	lumber Applied For()	FEI Num	nber Not Appl	icable ()	Certific	ate of Status Desired()	
Name and	Address of C	urrent	Registered Agent:		Name and	Address of	f New Reg	gistered Agent:	
1201 HAYS TALLAHAS	SSEE, FL 3230	01 L	JS	ournoso of	changing i	ts registeres	l office or	registered agent, or both,	
	of Florida.	subillic	s this statement for the p	ourpose or	Changing i	is registered	i onice or	registered agent, or both,	
SIGNATUR	RE:								
	Electron	ic Sigr	nature of Registered Ago	ent				Date	
Election Car	npaign Financing	g Trust	Fund Contribution ().						
OFFICERS	S AND DIREC	TORS:	:		ADDITION	IS/CHANGE	S TO OF	FICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () FIORANI, MICH 4371 N.W. 124 CORAL SPRING	TH AVE			Title: Name: Address: City-St-Zip:	P FIORANI, MI 2280 NW 30 POMPANO E	CHAEL TH PLACE	() Addition	
Title: Name: Address: City-St-Zip:	VP () SELBY, IAN 4371 N.W. 124 CORAL SPRING				Title: Name: Address: City-St-Zip:	CEO FIORANI, JC 2280 NW 30 POMPANO E	SE M TH PLACE	() Addition	
Title: Name: Address: City-St-Zip:	()	Delete			Title: Name: Address: City-St-Zip:	COO PIERANTON 2280 NW 30 POMPANO E	I, CHRISTIA TH PLACE		
Title: Name: Address: City-St-Zip:	()	Delete			Title: Name: Address: City-St-Zip:	VP FIORANI, MA 2280 NW 30 POMPANO E	ARISTELA TH PLACE	(X) Addition 33069 US	
Title: Name: Address: City-St-Zip:	()	Delete			Title: Name: Address: City-St-Zip:	VP PIERANTON 2280 NW 30 POMPANO E	I, VITTORIO TH PLACE		

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: MARISTELA FIORANI VP 02/20/2005