

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055474

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: DEMAND DELIVERY SYSTEMS INC.

## Current Principal Place of Business:

8098 NW 96 TERR STE 106  
TAMARAC, FL 33321

## New Principal Place of Business:

## Current Mailing Address:

8098 NW 96 TERR STE 106  
TAMARAC, FL 33321

## New Mailing Address:

FEI Number: 20-0969865

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, FREDERICK  
8098 NW 96 TERR STE 106  
TAMARAC, FL 33321 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BROWN, FREDERICK  
Address: 8098 NW 96 TERR STE 106  
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BROOKS, MICHAEL A  
Address: 8070 NW 96 TERRACE STE 207  
City-St-Zip: TAMARAC, FL 33321

Title: S ( ) Change (X) Addition  
Name: GRAHAM, CHRISTOPHER  
Address: 4925 WASHINGTON STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: T ( ) Change (X) Addition  
Name: BROOKS, MICHAEL  
Address: 8070 NW 96 TERRACE STE 207  
City-St-Zip: TAMARAC, FL 33321

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: MICHAEL BROOKS

PRES

04/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date