

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032805

FILED  
May 01, 2007  
Secretary of State

Entity Name: RADIANT DESIGN MARKETING SOLUTIONS INC.

## Current Principal Place of Business:

P.O. BOX 3482  
TALLAHASSEE, FL 32315

## New Principal Place of Business:

1500 MICCOSUKEE ROAD  
TALLAHASSEE, FL 32308

## Current Mailing Address:

P.O. BOX 3482  
TALLAHASSEE, FL 32315

## New Mailing Address:

FEI Number: 36-4571754      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTGOMERY, JOSHUA  
1500 MICCOSUKEE ROAD  
TALLAHASSEE, FL 32308      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: MONTGOMERY, JOSHUA  
Address: 1500 MICCOSUKEE ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP/D ( ) Delete  
Name: MKWANAZI, THANDIWE  
Address: 626 BUTTONWOOD DRIVE  
City-St-Zip: TEXAS CITY, TX 77591

Title: T ( ) Delete  
Name: MONTGOMERY, JOSHUA  
Address: 1500 MICCOSUKEE ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete  
Name: MKWANAZI, THANDIWE  
Address: 626 BUTTONWOOD DRIVE  
City-St-Zip: TEXAS CITY, TX 77591

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSHUA MONTGOMERY

P/D

05/01/2007

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

\_\_\_\_\_  
Date