2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P05000078706

Entity Name: NSR DISPLAYS INC.

Current Principal Place of Business:

439 NE BAKER ROAD
STUART, FL 34994

New Principal Place of Business:

940 NW FRESCO WAY APT 107
JENSEN BEACH, FL 34957

Current Mailing Address:

439 NE BAKER ROAD
STUART, FL 34994

New Mailing Address:

940 NW FRESCO WAY APT 107
JENSEN BEACH, FL 34957

FEI Number: 20-2934073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCABE, MICHAEL P
439 NE BAKER RD
STUART, FL 34994 US

Name and Address of New Registered Agent:

MCCABE, MICHAEL P
940 NW FRESCO WAY APT 107
JENSEN BEACH, FL 34957 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: 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CARTWRIGHT, THOMAS
Address: 10 PERRIWINKLE CIRCLE
City-St-Zip: STUART, FL 34994 US

Title: V ( ) Delete
Name: MCCABE, MICHAEL
Address: 439 NE BAKER RD
City-St-Zip: STUART, FL 34994

Title: S/T ( ) Delete
Name: CARTWRIGHT, ANNA
Address: 10 PERRIWINKLE CIRCLE
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: MCCABE, MICHAEL
Address: 940 NW FRESCO WAY APT 107
City-St-Zip: JENSEN BEACH, FL 34957

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: MICHAEL MCCABE V 04/30/2009
Electronic Signature of Signing Officer or Director — Date