

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106940

Entity Name: DIGITAL DARKROOM EXPERTS, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

7540 103RD ST
208
JACKSONVILLE, FL 32210

New Principal Place of Business:

9658 CLINTON CORNERS DRIVE
JACKSONVILLE, FL 32222

Current Mailing Address:

9658 CLINTON CORNERS DR.
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 26-1132714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLF, JUDITH E
7540 103RD ST #208
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

WOLF, JUDITH E
9658 CLINTON CORNERS DRIVE
JACKSONVILLE, FL 32222 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: _____

Electronic Signature of Registered Agent

04/30/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOLF, ROBERT M
Address: 7540 103RD ST #208
City-St-Zip: JACKSONVILLE, FL 32210

Title: ST () Delete
Name: WOLF, JUDITH E
Address: 7540 103RD ST #208
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WOLF, ROBERT M
Address: 9658 CLINTON CORNERS DRIVE
City-St-Zip: JACKSONVILLE, FL 32222

Title: ST (X) Change () Addition
Name: WOLF, JUDITH E
Address: 9658 CLINTON CORNERS DRIVE
City-St-Zip: JACKSONVILLE, FL 32222

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: JUDITH E. WOLF

Electronic Signature of Signing Officer or Director

ST

04/30/2008

Date