

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000102391

FILED
Sep 12, 2007
Secretary of State

Entity Name: TELEDIMENSIONS INTERNATIONAL INC.

Current Principal Place of Business:

15725 NW 15 AVENUE
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

701 BRICKELL AVENUE
SUITE 3000
MIAMI, FL 33131

New Mailing Address:

FEI Number: 98-0509692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: WOITSCHATZKE, JAN
Address: 26723 EMDEN
City-St-Zip: GERMANY, OC

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: STULL, REX R
Address: 2207 FRANKLIN LAUREL ROAD
City-St-Zip: NEW RICHMOND, OH 45157 US

Title: DS () Change (X) Addition
Name: CHAMBERLAIN, CRAIG
Address: 2936 JACKSON AVENUE
City-St-Zip: MIAMI, FL 33169 US

Title: DAS () Change (X) Addition
Name: WOITSCHATZKE, JAN-H
Address: STEDINGER STRASSE 11; 26723 EMDEN
City-St-Zip: GERMANY, OC

Title: SVP () Change (X) Addition
Name: GOOSSENS, MARC
Address: 6918 GAMMWELL DRIVE
City-St-Zip: CINCINNATI, OH 45230 US

Title: VPT () Change (X) Addition
Name: YORDI, AMIR EL
Address: 10 ARAGON AVE., APT. #1120
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP () Change (X) Addition
Name: ELLIS, DOUG
Address: 269 NE 104TH STREET
City-St-Zip: MIAMI SHORES, FL 33169 US

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: REX R. STULL

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09/12/2007

Electronic Signature of Signing Officer or Director

_____ Date