

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000070038

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: DIGITAL DISC DUPLICATION USA, INC.

## Current Principal Place of Business:

7087 GRAND NATIONAL DR SUITE 100  
ORLANDO, FL 32819

## New Principal Place of Business:

7087 GRAND NATIONAL DR SUITE 100  
ORLANDO, FL 32819 US

## Current Mailing Address:

7087 GRAND NATIONAL DR SUITE 100  
ORLANDO, FL 32819

## New Mailing Address:

P.O. BOX 2137  
DAVENPORT, FL 33836 US

FEI Number: 26-0496102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LAVIGNE, JAMES R  
7087 GRAND NATIONAL DR SUITE 100  
ORLANDO, FL 32819 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: D ( ) Delete  
Name: ADAMS, KARL  
Address: 25 HUNTINGFIELD RD BURY ST EDMUNDS  
City-St-Zip: SUFFOLK IP33 2JA UK, XX

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ADAMS, KARL D  
Address: 1513 LEXINGTON AVENUE  
City-St-Zip: DAVENPORT, FL 33837 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: KARL D. ADAMS

PRES

04/01/2008

Electronic Signature of Signing Officer or Director

Date