

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086636

Entity Name: DARK GLASS IMAGES, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

412 ASBURY WAY  
BOYNTON BEACH, FL 33426

## New Principal Place of Business:

## Current Mailing Address:

412 ASBURY WAY  
BOYNTON BEACH, FL 33426

## New Mailing Address:

FEI Number: 26-0644277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIEDMAN, MARC  
8634 NW 59TH PLACE  
PARKLAND, FL 33067 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: D ( ) Delete  
Name: MORTENSEN, KRISTOFER  
Address: 412 ASBURY WAY  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D ( ) Delete  
Name: ALBA, CHRISTOPHER  
Address: 412 ASBURY WAY  
City-St-Zip: BOYNTON BEACH, FL 33426

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHRISTOPHER ALBA

D

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date