

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000116869

Entity Name: ISOLDI MULTIMEDIA, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

5300 NW 12TH AVENUE
UNIT 9
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

5300 NW 12TH AVENUE
UNIT 9
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 26-1300709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTTI, DEBRA
1821 SW 68TH AVE
NORTH LAUDERDALE, FL 33068 US

Name and Address of New Registered Agent:

SCOTTI, DEBRA
336 N BIRCH ROAD 4H
FORT LAUDERDALE, FL 33304 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: SCOTTI, DEBRA
Address: 1821 SW 68TH AVE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VP () Delete
Name: ST CLAIRE, RAYMOND
Address: 1821 SW 68TH AVE
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: SCOTTI, DEBRA
Address: 336 N BIRCH ROAD 4H
City-St-Zip: FT LAUDERDALE, FL 33304

Title: VP (X) Change () Addition
Name: ST CLAIRE, RAYMOND
Address: 336 N BIRCH ROAD
City-St-Zip: FT LAUDERDALE, FL 33304

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: DEBRA SCOTTI

PTS

04/30/2008

Electronic Signature of Signing Officer or Director

Date