

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000043779

Entity Name: DMX INTEGRATION, INC.

FILED
Sep 12, 2012
Secretary of State

Current Principal Place of Business:

4501 PARKWAY COMMERCE BLVD.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4501 PARKWAY COMMERCE BLVD.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3320669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PD
Name: SINDONI, PAUL
Address: 4501 PARKWAY COMMERCE BLVD
City-St-Zip: ORLANDO, FL 32808

Title: AS
Name: YUNCZA, JOHN
Address: 4501 PKWY COMMERCE BLVD
City-St-Zip: ORLANDO, FL 32808

Title: SD
Name: CALLAHAN, THOMAS H
Address: 3005 HIGHLAND PARKWAY, SUITE 200
City-St-Zip: DOWNERS GROVE, IL 60515

Title: AS
Name: CIBAS, RAMONA
Address: 3005 HIGHLAND PARKWAY, SUITE 200
City-St-Zip: DOWNERS GROVE, IL 60515

Title: VT
Name: WAKEFORD, STEVE
Address: 3005 HIGHLAND PARKWAY, SUITE 200
City-St-Zip: DOWNERS GROVE, IL 60515

Title: AS
Name: WILLIAMS, CARTER
Address: 4501 PARKWAY COMMERCE BLVD
City-St-Zip: ORLANDO, FL 32808

I hereby 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 all other like empowered.

SIGNATURE: JOHN YUNCZA

AS

09/12/2012

Electronic Signature of Signing Officer or Director

Date