## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Apr 30, 2003 00.00 F
DOCUMENT # P960000333 1. Entity Name DIRECT DIGITAL IMAGING, INC.		317	Secretary of Star	
Principal Place	a of Business	Mailing Address	<del></del> -	,
3260 DUNDE		3250 DUNDEE ROAD WINTER HAVEN, FL 33884		-
				THE TRANSPOLATE LOCKER BOUGH RECOLD BEING BROWN BOURD TOTAL STORY STORY STORY CORNERS OF
	- The state of the		The same and the s	
DO NOT WRITE IN THIS SPACE				04152005 No Chg-P CR2E034 (10/03)
				4. FEI Number Applied For
				59-3385181   Not Applicable
				5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Current R	egistered Agent		A STATE OF THE STA
DANK CV 1 A DDV V				
DANLEY, LARRY K 3250 DUNDEE ROAD			}	DO NOT WRITE
WINTER HAVEN, FL 33884				IN THIS SPACE
			}	
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed of printed name of registered agent and title II applicable (NOTE Registered Agent signature required when reinstating)  DATE				
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FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Finar	nding \$5.	.00 May Be
After Ma	ay 1, 2005 Fee will be \$550.0	Trust Fund Contribution.	LJ ADD	led to Fees (1000000247221
10.	OFFICERS AND D	RECTORS	1	74/30/05-80107-001 150.00
TITLE	PD	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
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CITY-ST-ZIP	WINTER HAVEN, FL 33884		Î	
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NAME	DANLEY, JACQUELYN C			
STREET ADDRESS	3250 DUNDEE ROAD		1	f
CITY-ST-ZIP	WINTER HAVEN, FL 33884	<del></del>	-[	
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12. I hereby o	certify that the Information supplied with t	nis filing does not quality for the exe	emption stated in Se	ection 119.07(3)(I), Florida Statutes. I further certify that the information
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
changed, or on an attachment with an address, with all other like empowered				