2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007
Secretary of State

DOCUMENT# P97000088485

Entity Name: DIGITAL COLOR TECHNOLOGIES, INC.

Current Principal Place of Business:

6545 NOVA DRIVE
SUITE 203
DAVIE, FL 33317

New Principal Place of Business:

Current Mailing Address:

6545 NOVA DRIVE
SUITE 203
DAVIE, FL 33317

New Mailing Address:

FEI Number: 65-0790041 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHBY, CHARLES
6545 NOVA DRIVE
SUITE 203
DAVIE, FL 33317 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: P ( ) Delete
Name: HANDIS, GARY
Address: 7798 LA MIRADA DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: S ( ) Delete
Name: ROGGIO, JAMES
Address: 2178 LOINES AVENUE
City-St-Zip: MERRICK, NY 11566

Title: D ( ) Delete
Name: LATREILLE, RAOUL
Address: 2501 SOUTH OCEAN DRIVE, APT 1010
City-St-Zip: HOLLYWOOD, FL 33019

Title: V ( ) Delete
Name: BENDER, ROBERT
Address: 180 WEST END AVE #30E
City-St-Zip: NEW YORK, NY 10023

Title: D ( ) Delete
Name: ASHBY, CHARLES
Address: 1479 NW 153 LANE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: GARY HANDIS PRES 01/17/2007

Electronic Signature of Signing Officer or Director — Date