

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000009665

FILED
Sep 27, 2006
Secretary of State

Entity Name: THE BALLISTIC PIXEL LAB INC.

Current Principal Place of Business:

43 SKYLINE DRIVE
SUITE 3001
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

43 SKYLINE DRIVE
SUITE 3001
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 59-3558731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, E. NICHOLAS III
12200 W. COLCONIAL DRIVE
SUITE 303
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

JOBES, GREGORY M
4225 ANISSA AVENUE
ORLANDO, FL 32814 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: GREG JOBES

09/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MATHIEU, DAVID
Address: 511 ARCHWOOD DRIVE
City-St-Zip: DEBARY, FL 32713

Title: V () Delete
Name: WORLEY, DONALD JR
Address: 741 GOLDEN LARCH COURT
City-St-Zip: DELTONA, FL 32725

Title: V (X) Delete
Name: JOBES, GREG
Address: 4225 ANISSA AVENUE
City-St-Zip: ORLANDO, FL 32814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: JOBES, GREGORY
Address: 4225 ANISSA AVENUE
City-St-Zip: ORLANDO, FL 32814

Title: CEO (X) Change () Addition
Name: WORLEY, DONALD JR
Address: 741 GOLDEN LARCH COURT
City-St-Zip: DELTONA, FL 32725

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: GREGORY JOBES

PSD

09/27/2006

Electronic Signature of Signing Officer or Director

Date