

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 410800

FILED
Apr 27, 2006
Secretary of State

Entity Name: LASER COMPUTER GRAPHICS, INC.

Current Principal Place of Business:

3100 W 84TH STREET
3
HIALEAH, FL 33018 US

New Principal Place of Business:

Current Mailing Address:

3100 W 84TH STREET
3
HIALEAH, FL 33018 US

New Mailing Address:

FEI Number: 59-1453507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAULKIN, JOEL M ESQ.
1320 S DIXIE HWY
1275
CORAL GABLES, FL 33146 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: DPS () Delete
Name: CAPODIFERRO, ANDREW J
Address: 3100 W 84TH STREET
City-St-Zip: HIALEAH, FL 33018 US

Title: VPT (X) Delete
Name: CAPODIFERRO, ANDREW J
Address: 3100 W 84TH STREET
City-St-Zip: HIALEAH, FL 33018 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: CAPODIFERRO, ANDREW J
Address: 3100 W 84TH STREET #3
City-St-Zip: HIALEAH, FL 33018 US

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: ANDREW CAPODIFERRO

DPS

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date