

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000738

FILED  
Sep 12, 2005  
Secretary of State

**Entity Name:** INTERNATIONAL IMAGING SYSTEMS, INC.

**Current Principal Place of Business:**

6689 N.W. 16TH TERRACE  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

2419 E. COMMERCIAL BLVD  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

6689 N.W. 16TH TERRACE  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

2419 E. COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308

**FEI Number:** 65-0854589

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** (X)

**Name and Address of Current Registered Agent:**

SMITH, C. LEO  
6689 N.W. 16TH TERRACE  
FORT LAUDERDALE, FL 33309 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: PD ( ) Delete  
Name: SMITH, C. LEO  
Address: 6689 N.W. 16TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ST ( ) Delete  
Name: ARCHER, SUSAN  
Address: 6689 N.W. 16TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: SARAFIANOS, ALEX  
Address: 6689 N.W. 16TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33309

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** LEO SMITH

PT

09/12/2005

Electronic Signature of Signing Officer or Director

Date