

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47719

FILED
Mar 06, 2008
Secretary of State

Entity Name: UES GRAPHIC SERVICES, INC.

Current Principal Place of Business:

814 BEACH TRAIL
UNIT D
INDIAN ROCKS BEACH, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1018
INDIAN ROCKS BEACH, FL 33785 US

New Mailing Address:

FEI Number: 59-2742589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREWS, PAMELA
814 BEACH TRAIL UNIT C
INDIAN ROCKS BEACH, FL 33785 US

Name and Address of New Registered Agent:

ANDREWS, PAMELA
814 BEACH TRAIL UNIT D
INDIAN ROCKS BEACH, FL 33785 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: _____ 03/06/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANDREWS, WILLIAM H.,
Address: PO BOX 1018
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VPS () Delete
Name: ANDREWS, PAMELA
Address: PO BOX 1018
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: PAMELA B ANDREWS OFFI 03/06/2008
Electronic Signature of Signing Officer or Director Date