

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000027737

FILED
Apr 29, 2005
Secretary of State

Entity Name: ALL ABOUT COPIERS, INC.

Current Principal Place of Business:

6790 NW 186 ST NO 503
MIAMI, FL 33015

New Principal Place of Business:

14532SW142PL
MIAMI, FL 33186

Current Mailing Address:

6790 NW 186 ST NO 503
MIAMI, FL 33015

New Mailing Address:

14532SW142PL
MIAMI, FL 33186

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACUNA, MARTIN
6790 NW 186 ST NO 503
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

ACUNA, MARTIN
14532SW142PL
MIAMI, FL 33186 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: MARTIN ACUNA

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ACUNA, CENAIDA
Address: 6790 NW 186 ST NO 503
City-St-Zip: MIAMI, FL 33015

Title: VD () Delete
Name: ACUNA, MARTIN
Address: 6790 NW 186 ST NO 503
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ACUNA, CENAIDA
Address: 14532SW142PL
City-St-Zip: MIAMI, FL 33186

Title: VD (X) Change () Addition
Name: ACUNA, MARTIN
Address: 14532SW142PL
City-St-Zip: MIAMI, FL 33186

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: CENAIDA ACUNA

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date