## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000042801

Entity Name: PREPRESS CONSOLIDATED COLOR, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12909 SW 133RD COURT 18131 SW 149 AVENUE MIAMI, FL 33186 US MIAMI, FL 33187 US

Current Mailing Address: New Mailing Address:

12909 SW 133RD COURT 18131 SW 149 AVENUE MIAMI, FL 33186 US MIAMI, FL 33187 US

FEI Number: 65-0500127 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

OSCAR BORSTEN

11548 SW 142ND AVENUE

PENTHOUSE I

MIAMI, FL 33186 US

BORSTEN, LEONARDO M PD

18131 SW 149 AVENUE

MIAMI, FL 33187 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: LEONARDO BORSTEN 04/17/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: VSTD () Delete
Name: BORSTEN, OSCAR
Address: 11548 S.W. 142ND AVE.

City-St-Zip: MIAMI, FL

 Title:
 PD
 ( ) Delete

 Name:
 BORSTEN, LEONARDO

 Address:
 18131 SW 149 AVE

 City-St-Zip:
 MIAMI, FL 33187

 Title:
 D
 ( ) Delete

 Name:
 BORSTEN, BENEDICTUS

 Address:
 10026 SW 144 PLACE

City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSTD (X) Change ( ) Addition
Name: BORSTEN, OSCAR A VSTD
Address: 11548 S.W. 142ND AVE.
City-St-Zip: MIAMI, FL 33186

Title: PD (X) Change ( ) Addition
Name: BORSTEN, LEONARDO M PD
Address: 18131 SW 149 AVE

Address: 18131 SW 149 AVE City-St-Zip: MIAMI, FL 33187

Title: D (X) Change () Addition
Name: BORSTEN, BENEDICTUS B D
Address: 10026 SW 144 PLACE
City-St-Zip: MIAMI, FL 33187

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: LEONARDO BORSTEN PD 04/17/2006