2007 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIA

ANNUAL REPORT FILED Jul 10, 2007 08:00 AM **DOCUMENT # 386284 Secretary of State** ATLANTIC OFFSET PRINTING, INC. Principal Place of Business Mailing Address 2960 N.W. 2ND AVENUE 2960 N.W. 2ND AVENUE SUITE 9 SUITE 9 BOCA RATON, FL 33431 BOCA RATON, FL 33431 07022007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1359979 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COBB, CHARLES E. DO NOT WRITE 641 N.E. 30 PL. BOCA RATON, FL 33431 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent, SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS 10. TITLE NAME COBB, CHARLES E. 641 N.E. 30 PL. STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL U00000768004 TITLE 07/10/07-90029-007 150.00 NAME STREET ADDRESS CATY - ST - ZIP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that thy signature shall have the same legal effect as if prade under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this people as required by Chapter 607, Florida trialities, and that my name appears in Block 10 or Block 11 is changed, or on an attachment with an address, until all other like empowered. ysame legal effect as if prade under oath; that I am an officer or director 07, Florida Batutes; and that my name appears in Block 10 or Block 11 if

Date

Daytime Phone #