## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 453492**

DDINTEDO OFDVIOR OF FLODIDA INC

FILED Apr 24, 2009 Secretary of State

Entity Name: PRINTERS SERVICE OF FLORIDA, INC.	
Current Principal Place of Business:	New Principal Place of Business:
1580 NW 27TH AVE SUITE 12 POMPANO BEACH, FL 33069 US	
Current Mailing Address:	New Mailing Address:
26 BLANCHARD ST. NEWARK, NJ 07105	
FEI Number: 22-2040499 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:
LIROFF, RICHARD B 222 BEACH RD #9 SARASOTA, FL 34242 US	
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	gent Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

Title: CHMD ( ) Delete LIROFF, RICHARD Name: 187 HILL DRIVE Address:

City-St-Zip: SOUTH ORANGE, NJ 07079 US

Title: STD () Delete LIROFF, HARRIET Name: Address: 187 HILL DRIVE

SOUTH ORANGE, NJ 07079 US City-St-Zip:

Title: CFO ( ) Delete MANTIONE, RUSSELL Name:

Address: 26 BLANCHARD ST City-St-Zip: NEWARK, NJ 07105 US LIROFF, HARRIET S

LIROFF, RICHARD B

SOUTH ORANGE, NJ 07079 US

187 HILL DRIVE

(X) Change ( ) Addition

(X) Change ( ) Addition

Name: Address: 187 HILL DRIVE

CHMD

SOUTH ORANGE, NJ 07079 US City-St-Zip:

Title: () Change () Addition Name: Address:

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: RUSSELL R MANTIONE **CFO** 04/24/2009