## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 562015** 

Entity Name: COLOR SPECTRUM PRINTING, INC.

FILED Feb 03, 2007 Secretary of State

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

12900 AUTOMOBILE BLVD. 12105 28TH STREET N. SUITE G BUILDING A

CLEARWATER, FL 33762 SAINT PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

12900 AUTOMOBILE BLVD. 12105 28TH STREET N.

SUITE G BUILDING A

CLEARWATER, FL 33762 SAINT PETERSBURG, FL 33716

FEI Number: 59-1810589 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:

IBRAHIM, SOHEIR IBRAHIM, SOHEIR VP/T/D
1012 LAKE RIDGE DR IBRAHIM, SOHEIR VP/T/D
1012 LAKE RIDGE DR

SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 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: SOHEIR IBRAHIM 02/03/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P/D (X) Change ( ) Addition Name: IBRAHIM, BASSMI M Name: IBRAHIM, BASSMI M Address: 1012 LAKE RIDGE DR 1012 LAKE RIDGE DR

City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: SAFETY HARBOR, FL 34695

Title: VST ( ) Delete Title: VPTD (X) Change ( ) Addition Name: IBRAHIM, SOHEIR Name: IBRAHIM, SOHEIR

Address: 1012 LAKE RIDGE DR Address: 1012 LAKE RIDGE DR City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP ( ) Delete Title: VPSD (X) Change ( ) Addition

Name:PETER, IBRÀHÍM BName:PETER, IBRÀHÍM BAddress:3310 BRIARWOOD CIRCLEAddress:3310 BRIARWOOD CIRCLECity-St-Zip:SAFETY HARBOR, FL 34695City-St-Zip:SAFETY HARBOR, FL 34695

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: SOHEIR IBRAHIM VPTD 02/03/2007