

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 645401

FILED
Apr 07, 2009
Secretary of State

Entity Name: 12 AVENUE COPY SERVICE INC.

Current Principal Place of Business:

1300 NW 29TH ST
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

1300 NW 29TH ST
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 59-1950226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, MIRIAM
7830 SW 86 CT.
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALDES, LAZARO R.
Address: 7830 SW 86 CT.
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: VALDES, MIRIAM
Address: 7830 SW 86 CT.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALDES, LAZARO R.
Address: 7830 SW 86 CT.
City-St-Zip: MIAMI, FL 33143

Title: V (X) Change () Addition
Name: VALDES, MIRIAM
Address: 7830 SW 86 CT.
City-St-Zip: MIAMI, FL 33143

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: MIRIAM VALDES

V

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date