

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 693540

FILED
Apr 11, 2007
Secretary of State

Entity Name: ORANGE SUNSHINE GRAPHICS, INC.

Current Principal Place of Business:

6825 PEMBROKE ROAD
PEMBROKE PINES, FL 33023

New Principal Place of Business:

5051 S. STATE ROAD 7
UNIT 517
DAVIE, FL 33314

Current Mailing Address:

6825 PEMBROKE ROAD
PEMBROKE PINES, FL 33023

New Mailing Address:

5051 S. STATE ROAD 7
UNIT 517
DAVIE, FL 33314

FEI Number: 59-2114035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVAS, PEDRO
6825 PEMBROKE ROAD
PEMBROKE PINES, FL 33023 US

Name and Address of New Registered Agent:

RIVAS, PEDRO
5051 S. STATE ROAD 7
UNIT 517
DAVIE, FL 33314 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: PEDRO RIVAS

04/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RIVAS, PEDRO,
Address: 6470 SW 6TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: DS () Delete
Name: RIVAS, GLENDA C,
Address: 6470 SW 6TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: DV () Delete
Name: MCCRANEY, BARBARA D,
Address: 817 W BEACON RD
City-St-Zip: LAKELAND, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PEDRO RIVAS

DP

04/11/2007

Electronic Signature of Signing Officer or Director

Date