## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT #836400**

f. Entity Name

MINUTEMAN PRESS INTERNATIONAL, INC.



FILED Feb 20, 2008 08:00 Al Secretary of State

Principal Place of Business

61 EXECUTIVE BLVD FARMINGDALE, NY 11735

Mailing Address

61 EXECUTIVE BLVD FARMINGDALE, NY 11735



02082008

No Chg-P

CR2E034 (11/05)

4. FEI Number 11-2347290 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Prione #

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

the above harded entity scorning this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Tam familiar with, and accept the obligations of registered agent.						
SIGNATURE					DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign F				\$5.00 May Be Added to Fees	, .	
10.	OFFICERS AND DIRECTORS			,		
TITLE NAME STREET ADDRESS CITY+ST+ZIP	PD TITUS, ROBERT A. 61 EXECUTIVE BLVD FARMINGDALE, NY 11735				U00000833334 02/28/08-80008-022 150.00	
TITLE NAME SIREET ADDRESS CITY-SI-ZIP	STD SWANSON, STANLEY R. 61 EXECUTIVE BLVD FARMINGDALE, NY 11735					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TITUS, ROY W. 61 EXECUTIVE BLVD FARMINGDALE, NY 11735			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TITUS, RAYMOND W. .1801 AUSTRALIAN AVENUE SW WEST PALM BEACH, FL 33409			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME 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 my 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an iddress with all other like empowered.						

OF SIGNING OFFICER OR DIRECTOR