

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836400

FILED
Apr 01, 2009
Secretary of State

Entity Name: MINUTEMAN PRESS INTERNATIONAL, INC.

Current Principal Place of Business:

61 EXECUTIVE BLVD
FARMINGDALE, NY 11735

New Principal Place of Business:

Current Mailing Address:

61 EXECUTIVE BLVD
FARMINGDALE, NY 11735

New Mailing Address:

FEI Number: 11-2347290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PD () Delete
Name: TITUS, ROBERT A.
Address: 61 EXECUTIVE BLVD
City-St-Zip: FARMINGDALE, NY 11735

Title: STD () Delete
Name: SWANSON, STANLEY R.,
Address: 61 EXECUTIVE BLVD
City-St-Zip: FARMINGDALE, NY 11735

Title: D () Delete
Name: TITUS, ROY W.
Address: 61 EXECUTIVE BLVD
City-St-Zip: FARMINGDALE, NY 11735

Title: D () Delete
Name: TITUS, RAYMOND W.
Address: 1801 AUSTRALIAN AVENUE SW
City-St-Zip: WEST PALM BEACH, FL 33409

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:

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

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: NICOLE GULINELLO

MS.

04/01/2009

Electronic Signature of Signing Officer or Director

Date