2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002226

Entity Name: PRINTVILLAGE, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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6278 N. FEDERAL HWY. #406 1881 W. STATE RD. 84 #107 FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33315 US

Current Mailing Address: New Mailing Address:

6278 N. FEDERAL HWY. #406 1881 W. STATE RD. 84 #107 FT. LAUDERDALE, FL 33308 FT. LAUDERDALE, FL 33315 US

FEI Number: 11-1706583 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:

JOSEPH, LAWANDA
2112 TYLER STREET
HOLLYWOOD, FL 33020 US
JOSEPH, LAWANDA
2112 HOLLYWOOD BLVD. SUITE 112
HOLLYWOOD, FL 33020 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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC () Delete Title: PC (X) Change () Addition

 Name:
 CHOO, MICHAEL
 Name:
 CHOO, MICHAEL

 Address:
 6278 N. FEDERAL HWY., #406
 Address:
 1881 W. STATE RD. 84 #107

City-St-Zip: FT. LAUDERDALE, FL 33308 City-St-Zip: FT. LAUDERDALE, FL 33315

Title: TS () Delete Title: TS (X) Change () Addition

 Name:
 KUIPER, PATRICIA
 Name:
 KUIPER, PATRICIA

 Address:
 6278 N. FEDERAL HWY., #406
 Address:
 1881 W. STATE RD. 84 #107

City-St-Zip: FT. LAUDERDALE, FL 33308 Address: 1881 W. STATE RD. 64 #107

City-St-Zip: FT. LAUDERDALE, FL 33315

 Name:
 GIESKE, F. GARY
 Name:
 GIESKE, F. GARY

 Address:
 6278 N. FEDERAL HWY., #406
 Address:
 1881 W. STATE RD. 84 #107

 City-St-Zip:
 FT. LAUDERDALE, FL 33308
 City-St-Zip:
 FT. LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA KUIPER TS 04/28/2005