2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # G31872 1. Entity Name XERÓGRAPHICS, INC. Mailing Address Principal Place of Business 1000 118TH AVE N 1000 118TH AVE N ST PETERSBURG, FL 33716 US ST PETERSBURG, FL 33716 03042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2279058 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent DO NOT WRITE CARTER, J. LEWIS 1000 118TH AVE N ST PETERSBURG, FL 33716 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title it applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May 8e U00000323629 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/22/05-80060-012 150.00 OFFICERS AND DIRECTORS 10. DP TITLE CARTER, J LEWIS NAME 1000 118TH AVE N STREET ADDRESS ST PETERSBURG, FL 33716 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITT F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE m£ NAME STREET ADDRESS CITY-ST-ZIP TIME NAME STREET ADDRESS CRTY - ST - ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 of trustee 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 address, with all other like empowered.

ER OR DIRECTOR

4/20/05

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FILED