2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G74567

FILED Sep 22, 2006 Secretary of State

Entity Name: RELIABLE REPROGRAPICS BLUEPRINT AND SUPPLY, INC.

Current Principal Place of Business: New Principal Place of Business:

2545 OLD OKEECHOBEE RD. W PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

2545 OLD OKEECHOBEE RD. W PALM BEACH, FL 33409

FEI Number: 59-2406597 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHLOSBERG, STEVEN SLATON, CELESTE
194 PARK PL 25000 PORTOFINO CIRCLE

JUPITER, FL 33458 US APT. #107
PALM BEACH GARDENS, FL 33418 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: CELESTE SLATON 09/22/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD () Delete Title: **PVPD** (X) Change () Addition SCHLOSBERG, STEVEN SLATON, CELESTE PVPD Name: Name: 194 PARK PLACE 25000 PORTOFINO CIRCLE, APT.#107 Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete Title: ST (X) Change () Addition

Name: SLATON, CELESTE Name: SCHLOSBERG, STEVE

Address: 194 PARK PLACE Address: 25000 PORTOFINO CIRCLE, APT.#107 City-St-Zip: JUPITER, FL 33458 City-St-Zip: PALM BEACH GARDENS, FL 33418

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: CELESTE SLATON PVPD 09/22/2006