2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J18679

FILED Mar 22, 2006 Secretary of State

Entity Name: COMMERCE PRINTING ASSOCIATES, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
% LINDA ME 2034 NW 55 MARGATE, F	TH AVE			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
% LINDA ME 2034 NW 55 MARGATE, F	TH AVE			
FEI Number: 59	9-2687456	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
		3 3		
MELTZER, L 7155 MONTF BOCA RATC The above na in the State o	LINDA RIO DR DN, FL 334 amed entity	33 US	purpose of changing its registered	d office or registered agent, or both,
7155 MONTF BOCA RATC The above na	LINDA RIO DR DN, FL 334 amed entity of Florida.	33 US	purpose of changing its registered	
7155 MONTF BOCA RATC The above na in the State o	LINDA RIO DR DN, FL 334 amed entity of Florida.	33 US		
7155 MONTF BOCA RATC The above na in the State o SIGNATURE	INDA RIO DR DN, FL 334 amed entity of Florida.	33 US submits this statement for the		d office or registered agent, or both,
7155 MONTF BOCA RATO The above nain the State of SIGNATURE	INDA RIO DR DN, FL 334 amed entity of Florida. Electro raign Financi	33 US submits this statement for the onic Signature of Registered Agong Trust Fund Contribution ().	ent	d office or registered agent, or both,
7155 MONTF BOCA RATO The above natin the State of SIGNATURE Election Camp OFFICERS A Title: Name: Name: Name: Address: 2	INDA RIO DR DN, FL 334 amed entity of Florida. Electro raign Financi	33 US y submits this statement for the onic Signature of Registered Ageng Trust Fund Contribution (). CTORS:) Delete NDA H AVE.	ent	d office or registered agent, or both, Date

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: STUART MELTZER PD 03/22/2006