

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64290

FILED  
Apr 11, 2012  
Secretary of State

**Entity Name:** ALL SERVICE GRAPHICS, INC.

**Current Principal Place of Business:**

% DONALD E. GUST  
1020 W EAU GALLIE BLVD, SUITE I  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

% DONALD E. GUST  
1020 W EAU GALLIE BLVD, SUITE I  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-2789825

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUST, DONALD E  
2701 GOLFVIEW DRIVE  
MELBOURNE, FL 32901 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

**OFFICERS AND DIRECTORS:**

Title: VPST  
Name: GUST, DONALD E  
Address: 2701 GOLFVIEW DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: P  
Name: SMITH, WILLIAM C  
Address: 2850 PINEAPPLE AVE  
City-St-Zip: MELBOURNE, FL 32935

I hereby 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 all other like empowered.

SIGNATURE: DONALD E GUST

VPST

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date