

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K75232

FILED
Apr 20, 2004
Secretary of State

Entity Name: COPIER MASTERS, INC.

Current Principal Place of Business:

14561 SW 18 CT
DAVIE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

14561 SW 18 CT
DAVIE, FL 33325 US

New Mailing Address:

FEI Number: 65-0107890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, VIDAL RAFAEL
14561 SW 18TH CT
FT LAUDERDALE, FL 33325 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PEREZ, VIDAL RAFAEL,
Address: 14561 SW 18TH CT
City-St-Zip: FT LAUDERDALE, FL

Title: DP () Delete
Name: PEREZ, ANA LUCIA,
Address: 14561 SW 18TH CT
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: PEREZ, VIDAL RAFAEL,
Address: 14561 SW 18TH CT
City-St-Zip: FT LAUDERDALE, FL 33325

Title: DP (X) Change () Addition
Name: PEREZ, ANA LUCIA,
Address: 14561 SW 18TH CT
City-St-Zip: FT LAUDERDALE, FL 33325

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: ANA L. PEREZ

DP

04/20/2004

Electronic Signature of Signing Officer or Director

Date