

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005664

Entity Name: COPIER MASTERS, LLC

FILED
Apr 06, 2005
Secretary of State

Current Principal Place of Business:

14561 SW 18 COURT
FT. LAUDERDALE, FL 33325

New Principal Place of Business:

4121 S.W. 47TH AVENUE
1317
FT. LAUDERDALE, FL 33314

Current Mailing Address:

14561 SW 18 COURT
FT. LAUDERDALE, FL 33325

New Mailing Address:

4121 S.W. 47TH AVENUE
1317
FT. LAUDERDALE, FL 33314

FEI Number: 20-0637214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, VIDAL
14561 SW 18 COURT
FT. LAUDERDALE, FL 33325 US

Name and Address of New Registered Agent:

COPIER MASTERS, INC.
14561 SW 18 COURT
DAVIE, FL 33325 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: VIDAL PEREZ

04/06/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COPIER MASTER INC.,
Address: 14561 SW 18 COURT
City-St-Zip: FT. LAUDERDALE, FL 33325

Title: MGRM () Delete
Name: JCN ENTERPRISES INC.,
Address: 14561 SW 18 COURT
City-St-Zip: FT. LAUDERDALE, FL 33325

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COPIER MASTER INC.,
Address: 14561 S.W. 18TH CT.
City-St-Zip: DAVIE, FL 33325

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VIDAL PEREZ

MGRM

04/06/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date