2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048715

Entity Name: COPIER GEEKS LLC

FILED Sep 14, 2006 Secretary of State

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

5150 S.W. 48TH WAY, STE. 606 DAVIE, FL 33314 ÚS

Current Mailing Address: New Mailing Address:

5150 S.W. 48TH WAY, STE. 606 DAVIE, FL 33314 ÚS

FEI Number: 20-1307817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HACKETT, TODD 5150 S.W. 48TH WAY, STE. 606 DAVIE, FL 33314 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete SEYO HACKETT, LORRAINE HACKETT, TODD M MGRM Name: Name: Address: 5150 S.W. 48TH WAY, STE. 606 Address: 5150 S.W. 48TH WAY, STE. 606

City-St-Zip: DAVIE, FL 33314 US City-St-Zip: DAVIE, FL 33314 US

Title: MGRM (X) Delete Title: () Change () Addition

Name: HACKETT, TODD Name: Address: 5150 SW 48TH WAY STE 606 Address: City-St-Zip: DAVIE, FL 33314 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: TODD M. HACKETT **MGRM** 09/14/2006