

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010823

FILED  
Jul 01, 2006  
Secretary of State

**Entity Name:** TROPICAL REPROGRAPHICS, LLC

**Current Principal Place of Business:**

4202 SW 25TH CT.  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

4202 SW 25TH CT.  
CAPE CORAL, FL 33914

**New Mailing Address:**

FEI Number: 20-2171558      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:**

OSSOWICZ, KENNETH  
4202 SW 25TH CT.  
CAPE CORAL, FL 33914      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:**

Title: MGRM      ( ) Delete  
Name: OSSOWICZ, KENNETH  
Address: 4202 SW 25TH CT.  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES:**

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 Chapter 119, 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: KENNETH OSSOWICZ

MM

07/01/2006

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