## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094603

Entity Name: GRAPHIC COLOR LLC

FILED Apr 08, 2009 Secretary of State

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

4255 NORTH UNIVERSITY DR. #310 4255 NORTH UNIVERSITY DR.

SUNRISE, FL 33351 APT 310

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

4255 NORTH UNIVERSITY DR. #310 4255 NORTH UNIVERSITY DR.

SUNRISE, FL 33351 APT 310

SUNRISE, FL 33351

FEI Number: 20-5619510 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AZ ACCOUNTING CORP
630 S. STATE RD 7
4255 N UNIVERSITY DR
MARGATE, FL 33068 US
310
SUNRISE, FL 33351 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: FERNANDO CHAVEZ 04/08/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CHAVEZ, FERNANDO
 Name:

 Address:
 4255 NORTH UNIVERSITY DR. #310
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 OCHOA, FANNY
 Name:

 Address:
 4255 NORTH UNIVERSITY DR. #310
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FERNANDO CHAVEZ MGR 04/08/2009