2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012781

Entity Name: GRAPHIX2PRINT, LLC

FILED Apr 09, 2009 Secretary of State

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

5450 NW 114 AVE 3169 WEST 78 PL

INT. 107 HIALEAH GARDENS, FL 33018 DORAL, FL 33178

Current Mailing Address: New Mailing Address:

5450 NW114 AVE 3169 WEST 78 PL

INT. 107 HIALEAH GARDENS, FL 33018 DORAL, FL 33178

FEI Number: 26-1976275 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:

GONZALEZ, MARCELA
5450 NW114 AVE
GONZALEZ, MARCELA
3169 WEST 78 PL

INT. 107 HIALEAH GARDENS, FL 33018 US DORAL, FL 33178 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: MARCELA GONZALEZ 04/09/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 GONZALEZ, MARCELA
 Name:
 GONZALEZ, MARCELA

 Address:
 5450 NW114 AVE
 Address:
 3169 WEST 78 PL

City-St-Zip: DORAL, FL 33178 City-St-Zip: HIALEAH GARDENS, FL 33018

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

 Name:
 Name:
 MUNIZ, PEDRO R

 Address:
 Address:
 3169 WEST 78 PL

City-St-Zip: City-St-Zip: HIALEAH GARDENS, FL 33018

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: MARCELA GONZALEZ PD 04/09/2009