

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90267 015 ***150.00

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DOCUMENT # P00000001339

1. Entity Name
ABOVE & BEYOND REPROGRAPHICS, INC.



Principal Place of Business
2054 PALM BEACH LAKES BLVD
WEST PALM BEACH FL 33409

Mailing Address
2054 PALM BEACH LAKES BLVD
WEST PALM BEACH FL 33409



2. Principal Place of Business
2161 Palm Beach Lakes Blvd
Suite, Apt. #, etc.
#412

3. Mailing Address
2161 Palm Beach Lakes Blvd.
Suite, Apt. #, etc.
Suite 412

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip
33409

Country
USA

Zip
33409

Country
USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0971362

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TRUE, DAVID R
2054 PALM BEACH LAKES BLVD
WEST PALM BEACH FL 33409

7. Name and Address of New Registered Agent

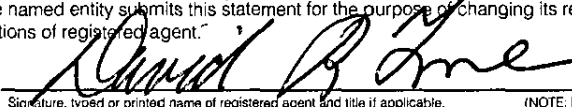
Name
David R. True

Street Address (P.O. Box Number is Not Acceptable)
2161 Palm Beach Lakes Blvd
Suite 412

City
West Palm Beach FL

Zip Code
33409

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 4/14/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

Trust Fund Contribution.

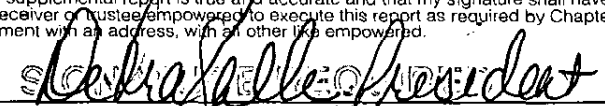
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VALLE, DEBRA S 2054 PALM BEACH LAKES BLVD WEST PALM BEACH FL 33409	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRUE, DAVID R 2054 PALM BEACH LAKES BLVD WEST PALM BEACH FL 33409	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HOPKINS, JOHN C 2054 PALM BEACH LAKES BLVD WEST PALM BEACH FL 33409	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Valle, Debra 2161 Palm Beach Lakes Blvd Suite 412 West Palm Beach, FL 33409	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	True, David 2161 Palm Beach Lakes Blvd Suite 412 West Palm Beach, FL 33409	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Hopkins, John 2161 Palm Beach Lakes Blvd Suite 412 West Palm Beach, FL 33409	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:  DATE 4/8/03 DAYTIME PHONE # 561-478-4774

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)