

P00000071872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

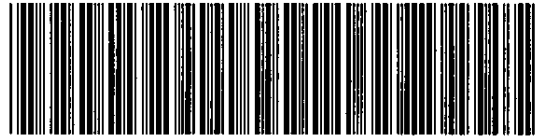
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Done  
9/19/08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** On Time Printing & Copy Center, Corp  
(Name of Corporation)

**DOCUMENT NUMBER:** P00000071872

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Veloz

(Name of Contact Person)

On Time Printing & Copy Center, Corp

(Firm/Company)

5895 NW 36 Street

(Address)

Mimai, FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra Veloz

(Name of Contact Person)

at ( 305 ) 870-0158

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida

CR2E045 (8/05)