

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078467

FILED
Jul 07, 2004
Secretary of State

Entity Name: GD PRINTING & GRAPHICS DESIGN, INC.

Current Principal Place of Business:

POST OFFICE BOX 960644
MIAMI, FL 33296

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 960644
MIAMI, FL 33296

New Mailing Address:

FEI Number: 65-1036613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, GLORIA
933 S. STREET ROAD 7
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOPEZ, GLORIA
Address: POST OFFICE BOX 960644
City-St-Zip: MIAMI, FL 33296

Title: VD () Delete
Name: LOPEZ, GUSTAVO
Address: POST OFFICE BOX 960644
City-St-Zip: MIAMI, FL 33296

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUSTAVO LOPEZ

VP

07/07/2004

Electronic Signature of Signing Officer or Director

Date