

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90336 018 ***150.00

DOCUMENT # P00000107830 1. Entity Name COLOR TO GO, INC.					
Principal Place of Business 2900 EAST COMMERCIAL BOULEVARD WEST UNIT FORT LAUDERDALE, FL 33308			Mailing Address 2900 EAST COMMERCIAL BOULEVARD WEST UNIT FORT LAUDERDALE, FL 33308		
2. Principal Place of Business 1819 S. DIXIE HWY. Suite, Apt. #, etc.		3. Mailing Address 1819 S. DIXIE HWY. Suite, Apt. #, etc.			
City & State POMPANO BEACH, FL		City & State POMPANO BEACH, FL		4. FEI Number 65-1055644	
Zip 33060		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BANNOY, LINETTE S 2900 E. COMMERCIAL BLVD WEST UNIT FORT LAUDERDALE, FL 33308			7. Name and Address of New Registered Agent Name BANNOY, LYNETTE S Street Address (P.O. Box Number is Not Acceptable) 1819 S. DIXIE HIGHWAY City POMPANO BEACH FL Zip Code 33060		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BANNOY, LYNETTE S 2900 EAST COMMERCIAL BOULEVARD WEST UNIT FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 1819 S. DIXIE HWY. POMPANO BEACH, FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BANNOY, STEVEN R 2900 EAST COMMERCIAL BOULEVARD WEST UNIT FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 1819 S. DIXIE HWY POMPANO BEACH, FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STAUBER, MARJORIE E 2900 EAST COMMERCIAL BOULEVARD WEST UNIT FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 1819 S. DIXIE HWY. POMPANO BEACH, FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.					
SIGNATURE LYNETTE BANNOY 4-16-04 754-234-4894 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					