

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91276 003 ***150.00

US192294 AV

DOCUMENT # P01000006115

1. Entity Name
COPYLITE PRINTER GROUP, INC.

Principal Place of Business
**4061 S.W. 47TH AVENUE
 FORT LAUDERDALE FL 33314**

Mailing Address
**4061 S.W. 47TH AVENUE
 FORT LAUDERDALE FL 33314**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4140 SW 30th AVE

3. Mailing Address
4140 SW 30th AVE

Suite, Apt. #, etc.
SUITE 100

Suite, Apt. #, etc.
SUITE 100

City & State
HOLLYWOOD, FL

City & State
HOLLYWOOD FL

Zip
33312

Country
USA

Zip
33312

Country
USA

4. FEI Number
65-1076310

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GARCIA-LINARES, MANUEL A
 201 S. BISCAYNE BOULEVARD
 MIAMI CENTER, 10TH FLOOR
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **MAUREEN RICCIARDI**
 Street Address (P.O. Box Number is Not Acceptable)
6988 NW 111th TERRACE
 City **PARKLAND FL** Zip Code **33076**

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.

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

4/29/02
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	YECKES, MITCH	
STREET ADDRESS	4061 S.W. 47TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33314	
TITLE	EXEC. VICE-PRESIDENT	<input type="checkbox"/> Delete
NAME	MAUREEN RICCIARDI	
STREET ADDRESS	4140 SW 30th AVE - SUITE 100	
CITY-ST-ZIP	HOLLYWOOD, FL 33312	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *M. Ricciardi*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 (954) 587-8750
 Date Day/Time Phone #

CR2E034 (9/01)