

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033627

FILED
Apr 22, 2009
Secretary of State

Entity Name: COSMOS PRINTING CORP.

Current Principal Place of Business:

15841 PINES BLVD
400
PEMBROKE PINES, FL 33027 US

Current Mailing Address:

15841 PINES BLVD
400
PEMBROKE PINES, FL 33027 US

FEI Number: 65-1091219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGULO, LUIS C
15841 PINES BLVD
400
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

15841 PINES BLVD
40
PEMBROKE PINES, FL 33027 US

New Mailing Address:

15841 PINES BLVD
40
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

ANGULO, LUIS C
15841 PINES BLVD
40
PEMBROKE PINES, FL 33027 US

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: LUIS C ANGULO

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANGULO, LUIS C
Address: 15841 PINE BLVD STE 400
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: VD () Delete
Name: ANGULO, SUSANA
Address: 15841 PINES BLVD STE 400
City-St-Zip: PEMROKE PINES, FL 33027 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANGULO, LUIS C
Address: 15841 PINE BLVD STE 40
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: VD (X) Change () Addition
Name: ANGULO, SUSANA
Address: 15841 PINES BLVD STE 40
City-St-Zip: PEMROKE PINES, FL 33027 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUIS C ANGULO

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date