

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042358

Entity Name: COPIER LIQUIDATOR INC.

FILED
Jul 12, 2006
Secretary of State

Current Principal Place of Business:

1499 SW 30TH AV
13
BOYNTON BEACH, FL 33426

Current Mailing Address:

1499 SW 30TH AV
13
BOYNTON BEACH, FL 33426

New Principal Place of Business:

3121 FAIRLANE FARMS RD
5
WELLINGTON, FL 33414

New Mailing Address:

3121 FAIRLANE FARMS RD
5
WELLINGTON, FL 33414

FEI Number: 26-0004631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOBO, FERNANDO
5 BOSWELL PL
BOYNTON BEACH, FL 33426 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: P () Delete
Name: LOBO, FERNANDO
Address: 1499 SW 30TH AV #13
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOBO, FERNANDO
Address: 3121 FAIRLANE FARMS RD #5
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the 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: FERNANDO LOBO

OWNE

07/12/2006

Electronic Signature of Signing Officer or Director

Date