

# **2006 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000086323

**FILED**  
**Oct 25, 2006**  
**Secretary of State**

**Entity Name:** INTERNATIONAL PRINTING SOURCE, INC.

**Current Principal Place of Business:**

5020 SW 121 AVENUE  
COOPER CITY, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

5020 SW 121 AVENUE  
COOPER CITY, FL 33330

**New Mailing Address:**

**FEI Number:** 65-1134252

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PERRY, KATHY L  
5020 SW 121 AVENUE  
COOPER CITY, FL 33330 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:** KATHY PERRY

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:** PERRY, KATHY L  
**Address:** 5020 SW 121 AVENUE  
**City-St-Zip:** COOPER CITY, FL 33330

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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 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:** KATHY PERRY

PD

10/25/2006

Electronic Signature of Signing Officer or Director

Date