2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003
Secretary of State

DOCUMENT# P02000014820

Entity Name: GRAPHIC ART SOLUTIONS, INC.

Current Principal Place of Business:

10504 SEDGEBROOK DRIVE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

10504 SEDGEBROOK DRIVE
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 68-0499320 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ARNAUD, ALISSA C
4414 WINDING RIVER DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

ARNAUD, ALISSA C
10504 SEDGEBROOK DRIVE
RIVERVIEW, FL 33569 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: ALISSA C. ARNAUD 04/29/2003
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ARNAUD, ALISSA C
Address: 4414 WINDING RIVER DRIVE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: ARNAUD, DAVID A JR.
Address: 4414 WINDING RIVER DRIVE
City-St-Zip: VALRICO, FL 33594

Title: V (X) Delete
Name: MCCALL, STEPHEN M
Address: 302 N. HUBERT AVENUE APT. 206
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ARNAUD, ALISSA C
Address: 10504 SEDGEBROOK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: V (X) Change ( ) Addition
Name: ARNAUD, DAVID A JR.
Address: 10504 SEDGEBROOK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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 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 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: ALISSA C. ARNAUD D 04/29/2003
Electronic Signature of Signing Officer or Director Date