2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079029

Title:

Name:

Address:

City-St-Zip:

() Delete

PUNZIRUDU, ASHLEY L

SPRING HILL, FL 34609

13247 DON LOOP

FILED Apr 22, 2008 Secretary of State

| Entity Nan | ne: SUNCOAS | ST REPROGRAPHICS, INC. | | | | | |
|---|--|---------------------------------|---|---|-------------------------|---------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | | |
| | MERCIAL WAY ILL, FL 34606 | , | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | | |
| | MERCIAL WAY ILL, FL 34606 | | | | | | |
| FEI Number: | 68-0515127 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status D | esired (X) | |
| Name and | Address of Cu | ırrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | | |
| 13247 DON | DU, DEBRA J N LOOP ILL, FL 34609 | US | | | | | |
| The above in the State | | ubmits this statement for the p | urpose of changing i | ts registered | office or registered ag | ent, or both, | |
| SIGNATUR | RE: | | | | | | |
| | Electronic | c Signature of Registered Age | nt | | Date | | |
| Election Carr | npaign Financing | Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | PC ()[PUNZIRUDU, MA 13247 DON LOO SPRING HILL, FI | P | Title: Name: Address: City-St-Zip: | PC () PUNZIRUDU, I 13247 DON LO SPRING HILL, | OOP | | |
| Title: Name: Address: City-St-Zip: | VT () [PUNZIRUDU, DE 13247 DON LOO SPRING HILL, FI | P | Title: Name: Address: City-St-Zip: | VT (X PUNZIRUDU, I 13247 DON LO SPRING HILL, | OOP | | |

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DEBRA J. PUNZIRUDU PC 04/22/2008

() Change () Addition