# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2009**
**Secretary of State**

DOCUMENT# P03000061011

**Entity Name:** SM COLOR GENERAL SERVICES, INC.

**Current Principal Place of Business:**

9394 BOCA RIVER CIRCLE
BOCA RATON, FL 33434

**New Principal Place of Business:**

9394 BOCA RIVER CIRCLE
BOCA RATON, FL 33434 US

**Current Mailing Address:**

9394 BOCA RIVER CIRCLE
BOCA RATON, FL 33434

**New Mailing Address:**

9394 BOCA RIVER CIRCLE
BOCA RATON, FL 33434 US

**FEI Number: 20-0025756** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
SECOND FLOOR
DEERFIELD BEACH, FL 33442 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: PD ( ) Delete
Name: LINGORDO, SEBASTIAO O
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434

Title: VPD ( ) Delete
Name: OLIVEIRA, NAJIA M DE
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434

Title: S ( ) Delete
Name: LINGORDO, SALEH O
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434

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

Title: PD (X) Change ( ) Addition
Name: LINGORDO, SEBASTIAO O
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434 US

Title: VPD (X) Change ( ) Addition
Name: OLIVEIRA, NAJIA M DE
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434 US

Title: S (X) Change ( ) Addition
Name: LINGORDO, SALEH O
Address: 9394 BOCA RIVER CIRCLE
City-St-Zip: BOCA RATON, FL 33434 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: SEBASTIAO O LINGORDO PD 05/01/2009

Electronic Signature of Signing Officer or Director — Date