

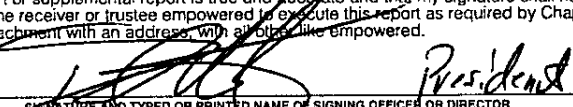


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90043 026 ***150.00

DOCUMENT # P04000017071 1. Entity Name SOUTHEAST PRINT SOLUTIONS, INC.																																																																																																																													
Principal Place of Business 825 EAST MAIN STREET LAKELAND, FL 33801			Mailing Address 825 EAST MAIN STREET LAKELAND, FL 33801																																																																																																																										
2. Principal Place of Business 240 Crescent Lake CT. Suite, Apt. #, etc. Lakeland, FLA		3. Mailing Address 240 Crescent Lake CT. Suite, Apt. #, etc. Lakeland, FLA																																																																																																																											
City & State Lakeland, FLA		City & State Lakeland, FLA		4. FEI Number 20-0630631																																																																																																																									
Zip 33813		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent HARLAN, BETH 825 EAST MAIN STREET LAKELAND, FL 33801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																										
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																													
SIGNATURE:  President 3-15-05 863-206-2922 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																													