2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045916

Entity Name: GULF SHORE REPROGRAPHICS CORP.

FILED Mar 31, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4300 FORD STREET EXTENSION STE 105 4300 FORD STREET EXTENSION FT MYERS, FL 33916

SUITE 104

FT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

4300 FORD STREET EXTENSION STE 105 4300 FORD STREET EXTENSION

SUITE 105 FT MYERS, FL 33916

FT MYERS, FL 33916

FEI Number: 20-2572966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HYATT, ELIZABETH HYATT, ELIZABETH

2466 DERBY DRIVE 4300 FÓRD STREET EXTENSION #105

DELTONA, FL 32738 US SUITE 105 FT MYERS, FL 33916 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: ELIZABETH HYATT 03/31/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HYATT, ELIZABETH Name: Name: HYATT, ELIZABETH

2466 DERBY DRIVE 4300 FORD STREET EXTENSION #205 Address: Address:

City-St-Zip: DELTONA, FL 32738 City-St-Zip: FT MYERS, FL 33916

Title: ٧S Title: ٧S (X) Change () Addition () Delete

HALUCHA, ALBERT Name: HALUCHA, ALBERT Name:

2466 DERBY DRIVE 4300 FORD STREET EXTENSION #105 Address: Address:

DELTONA, FL 32738 FT MYERS, FL 33916 City-St-Zip: 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: ELIZABETH **PRES** 03/31/2006