

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051771

FILED  
Mar 28, 2007  
Secretary of State

Entity Name: COPY'S R US, INC.

## Current Principal Place of Business:

2436 DEER MEADOW DRIVE  
APOPKA, FL 32703 US

## New Principal Place of Business:

1706 E. SEMORAN BLVD.  
SUITE 103  
APOPKA, FL 32703 US

## Current Mailing Address:

2436 DEER MEADOW DRIVE  
APOPKA, FL 32703 US

## New Mailing Address:

1706 E. SEMORAN BLVD.  
SUITE 103  
APOPKA, FL 32703 US

FEI Number: 20-2789209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: SWEENEY, ELISA M  
Address: 2436 DEER MEADOW DRIVE  
City-St-Zip: ORLANDO, FL 32837

Title: VTD ( ) Delete  
Name: SWEENEY, ROBERT E  
Address: 2436 DEER MEADOW DRIVE  
City-St-Zip: APOPKA, FL 32703

Title: SD ( ) Delete  
Name: SWEENEY, ELISA M  
Address: 2436 DEER MEADOW DRIVE  
City-St-Zip: APOPKA, FL 32703

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ROBERT E. SWEENEY

VTD

03/28/2007

Electronic Signature of Signing Officer or Director

Date