2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051771

SWEENEY, ÈLISA M

APOPKA, FL 32703

2436 DEER MEADOW DRIVE

Name:

Address:

City-St-Zip:

Entity Name: COPY'S R US, INC.

FILED Apr 22, 2008 Secretary of State

Current P	incipal Pla	ace of Business:	New Principal Plac	New Principal Place of Business:	
1706 E. SEMORAN BLVD. SUITE 103 APOPKA, FL 32703 US			2436 DEER MEADOW DRIVE APOPKA, FL 32703 US		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
1706 E. SEMORAN BLVD. SUITE 103 APOPKA, FL 32703 US				2436 DEER MEADOW DRIVE APOPKA, FL 32703 US	
FEI Number:	20-2789209	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address o	of Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
	H AVE. NO LM BEACH named enti	RTH I, FL 334110000 US	ne purpose of changing its register	ed office or registered agent, or both,	
	Elect	ronic Signature of Registered	Agent	Date	
Election Can	npaign Finan	cing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO SWEENEY, 2436 DEER ORLANDO,	MEADOW DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTD SWEENEY, 2436 DEER APOPKA, F	MEADOW DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title [.]	SD	() Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT E. SWEENEY VTD 04/22/2008