


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000068518
 1. Entity Name
 EGS DIGITAL GRAPHICS, INC.



Principal Place of Business 4710 EISENHOWER BLVD. SUITE B-10 TAMPA, FL 33634	Mailing Address 4710 EISENHOWER BLVD. SUITE B-10 TAMPA, FL 33634
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06062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2997640	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SANCHEZ, GERALD
 5223 NEW SAVANNAH CIRCLE
 WESLEY CHAPEL, FL 33544

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANCHEZ, GERALD 4710 EISENHOWER BLVD. SUITE B-10 TAMPA, FL 33634
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 06/09/08-80003-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **6/6/08** Daytime Phone #: **813-546-8157**