

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073792

Entity Name: MY DREAM PRINTING, INC.

FILED
Apr 30, 2011
Secretary of State

Current Principal Place of Business:

13899 BISCAYNE BLVD.
SUITE 110
NORTH MIAMI BEACH, FL 33181

New Principal Place of Business:

Current Mailing Address:

13899 BISCAYNE BLVD.
SUITE 110
NORTH MIAMI BEACH, FL 33181

New Mailing Address:

1650 N. E. 135TH STREET
305
NORTH MIAMI, FL 33181

FEI Number: 74-3147080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARLENE L. GRAY, P.A.
13899 BISCAYNE BLVD.
107
NORTH MIAMI BEACH,, FL 33181 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

OFFICERS AND DIRECTORS:

Title: P
Name: TURNER, RUTH
Address: 13899 BISCAYNE BLVD SUITE 110
City-St-Zip: NORTH MIAMI BEACH, FL 33181 US

Title: D
Name: TURNER, RUTH
Address: 13899 BISCAYNE BLVD SUITE 110
City-St-Zip: NORTH MIAMI BEACH,, FL 33181 US

Title: S
Name: TURNER, RUTH
Address: 13899 BISCAYNE BLVD SUITE 110
City-St-Zip: NORTH MIAMI, FL 33181 US

I hereby 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 all other like empowered.

SIGNATURE: RUTH TURNER

P

04/30/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date