

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123540

Entity Name: DIGICOPY PRODUCTS INC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

3492 NW 84 STREET  
UNIT 105  
HIALEAH, FL 33018

## New Principal Place of Business:

## Current Mailing Address:

18360 COLLINS AV, MILLENNIUM PLAZA,  
SUITE 103  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

FEI Number: 20-3438422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GS PROFESSIONAL SOLUTIONS INC  
2020 NE 163 ST  
SUITE 300-D  
NORTH MIAMI BEACH, FL 33162 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: PD ( ) Delete  
Name: MACHADO, HECTOR  
Address: 215 187 STREET  
City-St-Zip: SUNNY ISLE BEACH, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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.

SIGNATURE: HECTOR JOSE MACHADO

PD

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date