

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000148722

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** COMPUTER & PRINTER REPAIR, INC.

**Current Principal Place of Business:**

1600 PRAIRIE OAKS DR  
SAINT CLOUD, FL 34771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 700183  
SAINT CLOUD, FL 347700183 US

**New Mailing Address:**

**FEI Number:** 20-3759065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LIANTONIO, NICHOLAS  
1600 PRAIRIE OAKS DR  
SAINT CLOUD, FL 34771 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: PD  
Name: NICHOLAS LIANTONIO  
Address: 1600 PRAIRIE OAKS DR  
City-St-Zip: SAINT CLOUD, FL 34771

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: NICHOLAS LIANTONIO

PD

01/11/2011

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

\_\_\_\_\_  
Date