

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000026438

1. Entity Name
RGU COLOR, INC.



Principal Place of Business

124 BAY ST.
DAYTONA BEACH, FL 32114 US

Mailing Address

124 BAY ST.
DAYTONA BEACH, FL 32114 US



04142008 No Chg-P CR2E034 (11/05)

4. FEI Number

20-4361000

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HAMES, RONNIE
124 BAY ST.
DAYTONA BEACH, FL 32114

**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

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

RONNIE HAMES

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/08

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000902277
04/23/08-80101-017 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME HAMES, RONNIE
STREET ADDRESS 124 BAY ST
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE VP
NAME FOGELL, DENNIS
STREET ADDRESS 124 BAY ST.
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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

4/14/08

Date

386-253-7990

Daytime Phone #