

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048281

FILED
Mar 18, 2009
Secretary of State

Entity Name: POSTALOGIC MAILING SOLUTIONS CORP.

Current Principal Place of Business:

18441 NW 2ND AVE., STE. 101
MIAMI, FL 33169

New Principal Place of Business:

18441 NW 2ND AVE.,
STE 101
MIAMI, FL 33169

Current Mailing Address:

18441 NW 2ND AVE., STE. 101
MIAMI, FL 33169

New Mailing Address:

18441 NW 2ND AVE.,
STE 101
MIAMI, FL 33169

FEI Number: 20-4626945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIEBER, THOMAS D
18441 NW 2ND AVE., STE. 101
MIAMI, FL 33016 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: SIEBER, THOMAS D
Address: 1111 CRANDON BLVD., #1204
City-St-Zip: KEY BISCAYNE, FL 33169

Title: S () Delete
Name: SHERWOOD, RANDALL
Address: 7525 NW 61ST TERRACE, #2301
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS D. SIEBER

PRES

03/18/2009

Electronic Signature of Signing Officer or Director

Date