

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90031 034 ***150.00

DOCUMENT # P06000062564

1. Entity Name
DOCUMENT SOLUTIONS EQUIPMENT, INC.



40009100

Principal Place of Business
**4670 LINKS VILLAGE DRIVE
A402
PONCE INLET, FL 32127 US**

Mailing Address
**134 STONEHILL DRIVE
MAITLAND, FL 32751 US**



04012008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4784539	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**RUTA, ENRICO
134 STONEHILL DRIVE
MAITLAND, FL 32751**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUTA, ENRICO 134 STONEHILL DRIVE MAITLAND, FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MORICONI, GIUSEPPINA 134 STONEHILL DRIVE MAITLAND, FL 32751
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**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: Enrico Ruta 4/3/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #