

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049348

FILED
Apr 08, 2009
Secretary of State

Entity Name: DOCUTECH SYSTEMS AND PRODUCTS, INC.

Current Principal Place of Business:

1911 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

9655 SOUTH DIXIE HIGHWAY
SUITE 105
MIAMI, FL 33156 28

Current Mailing Address:

1911 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Mailing Address:

9655 SOUTH DIXIE HIGHWAY
SUITE 105
MIAMI, FL 33156 28

FEI Number: 26-1106149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOONEY, NEIL B
THE MOONEY LAW FIRM, LLC
1911 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 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: DVPS () Delete
Name: GALUPPO, OSVALDO A MR.
Address: 1911 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DPT () Delete
Name: MAZAIRA, GUILLERMO MR.
Address: 1911 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change () Addition
Name: GALUPPO, OSVALDO A MR.
Address: 9655 SOUTH DIXIE HIGHWAY
City-St-Zip: SUITE 105, FL 33156 28

Title: DPT (X) Change () Addition
Name: MAZAIRA, GUILLERMO MR.
Address: 9655 SOUTH DIXIE HIGHWAY
City-St-Zip: SUITE 105, FL 33156 28

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: GALUPPO OSVALDO A

DVPS

04/08/2009

Electronic Signature of Signing Officer or Director

Date