

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086600

FILED  
May 06, 2009  
Secretary of State

Entity Name: PREPRESS RX, INC.

**Current Principal Place of Business:**

141 ROYAL PALM COURT  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

141 ROYAL PALM COURT  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 26-3406556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
320 S. FLAMINGO ROAD  
347  
PEMBROKE PINES, FL 33027 US

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

TSCHOSIK, KIMBERLY A PRES  
141 ROYAL PALM COURT  
PLANTATION, FL 33317 US

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: KIMBERLY A. TSCHOSIK

05/06/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P, D ( ) Delete  
Name: TSCHOSIK, KIMBERLY A  
Address: 141 ROYAL PALM COURT  
City-St-Zip: PLANTATION, FL 33317

Title: S, T ( ) Delete  
Name: TSCHOSIK, KIMBERLY A  
Address: 141 ROYAL PALM COURT  
City-St-Zip: PLANTATION, FL 33317

**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: KIMBERLY A. TSCHOSIK

PRES

05/06/2009

Electronic Signature of Signing Officer or Director

Date