## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 28, 2006 08:00 AM **Secretary of State DOCUMENT # P94000053446** 1. Entity Name QUALITY COPY INC. Principal Place of Business Mailing Address 3941 N.W. 110TH AVENUE 3941 N.W. 110TH AVENUE CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 04172006 No Cho-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 65-0508804 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JACKSON, BANCROFT DO NOT WRITE 3941 N.W. 110TH AVENUE CORAL SPRINGS, FL 33065 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees 18. OFFICERS AND DIRECTORS TIRE NAME JACKSON, BANCROFT STREET ADDRESS 3941 N.W. 110TH AVENUE CORAL SPRINGS, FL 33065 CITY-ST-ZIP U00000545923 05/11/06-80095-024 150.00 THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE

12. I hereby certify that the information supplied with this tiling 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 celt; 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 charged, or on an attachment with an address, with all other like accountries.

STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ACCURESS City-SI-2IP

FILED