

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000071902

Entity Name: MG OFFICE PRODUCTS, INC.

FILED  
Mar 03, 2011  
Secretary of State

**Current Principal Place of Business:**

1644 LAND O'LAKES BLVD  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

1644 LAND O'LAKES BLVD  
LUTZ, FL 33549

**New Mailing Address:**

FEI Number: 59-3346026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, THOMAS R  
15910 EAGLE RIVER WAY  
TAMPA, FL 33624 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GRAHAM, MICHAEL  
Address: 901 HOLLYSHORE DR.  
City-St-Zip: LUTZ, FL 33548

Title: D  
Name: GRAHAM, LISA  
Address: 901 HOLLYSHORE DR.  
City-St-Zip: LUTZ, FL 33548

Title: D  
Name: GRAHAM, LISA S D  
Address: 901 HOLLYSHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

I hereby 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 all other like empowered.

SIGNATURE: LISA GRAHAM

VP

03/03/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date