2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092234

Entity Name: A.E.C. COPIES, INC.

FILED Mar 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

801 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33311 US

Current Mailing Address: New Mailing Address:

2400 EAST LAS OLAS BLVD., #147 801 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33311 US FORT LAUDERDALE, FL 33301 US

FEI Number: 65-0624635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SERRATT, OLEN H 801 N ANDREWS AVE FORT LAUDERDALE, FL 33311 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SERRATT, OLEN H SERRATT, OLEN H Name: Name: 801 N ANDREWS AVE 2400 E. LAS OLAS BLVD., #147 Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: Title: () Delete (X) Change () Addition OBRIG, MARILYNN Name: Name: OBRIG, MARILYNN

801 N ANDREWS AVE 2400 E. LAS OLAS BLVD., #147 Address: Address: FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

LIPNICKI, KENNETH S Name: Name: 801 N ANDREWS AVE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: OLEN SERRATT **PRES** 03/06/2006