

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000011371

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: LITIGATION GRAPHIX SERVICES, INC.

## Current Principal Place of Business:

2990 SW 35 AVE  
SUITE A  
MIAMI, FL 33133 US

## New Principal Place of Business:

5959 BLUE LAGOON DRIVE  
SUITE 301  
MIAMI, FL 33126 US

## Current Mailing Address:

2990 SW 35 AVE  
SUITE A  
MIAMI, FL 33133 US

## New Mailing Address:

FEI Number: 65-0634420      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOBEL, PETER N  
10360 SW 103RD CT.  
MIAMI, FL 33176 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: PD ( ) Delete  
Name: SOBEL, PETER N  
Address: 10360 SW 103RD CT.  
City-St-Zip: MIAMI, FL 33176

Title: VP ( ) Delete  
Name: CUMMINS, BRIAN  
Address: 3608 OLD SW 72 AVE  
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Delete  
Name: SOBEL, LIZABETH  
Address: 10360 SW 103RD COURT  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PETER SOBEL

PRES

04/30/2009

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

\_\_\_\_\_  
Date