

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 24, 2007 8:00 am
Secretary of State

05-24-2007 90001 003 ***150.00

DOCUMENT # P97000015311

1. Entity Name
HI TECH PRINTING SYSTEMS, INC.



Principal Place of Business
**3411 NE 6 TERRACE
POMPAÑO BEACH, FL 33064**

Mailing Address
**3411 NE 6 TERRACE
POMPAÑO BEACH, FL 33064**

LIGHTHOUSE POINT, FL 33074-50556

40118198



05042007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0728462

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**TRUDEAU, DAVID L SR
3411 NE 6 TERRACE
POMPAÑO BEACH, FL 33064**

**DO NOT WRITE
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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TRUDEAU, DAVID L SR
STREET ADDRESS	3411 NE 6 TERRACE
CITY - ST - ZIP	POMPAÑO BEACH, FL 33064
TITLE	D
NAME	TRUDEAU, PRISCILLA S
STREET ADDRESS	3411 NE 6 TERRACE
CITY - ST - ZIP	POMPAÑO BEACH, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #