2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2007 08:00 AM Secretary of State

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1. Entity Name

TONER CARTRIDGE RECHARGE, INC.



Principal Place of Business

HIALEAH, FL 33012

Mailing Address

4160 W 16 AVE STE 211

7923 NW 163 TRRA MIAMI LAKES, FL 33016



DO NOT WRITE IN THIS SPACE

03262007 CR2E034 (11/05)

4. FEI Number Applied For 65-0779824 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

PREITO, NINO CLARES 7923 NW 163 TRRA MIAMI LAKES, FL 33016

SIGNATURE:

DO NOT WRITE IN THIS SPACE

03-27-07

Daytime Phone #

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	f applicable	(NOTE: Registered A	gent signature	required when reinstating)	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00		ampaign Financir Contribution.	ng 🗆	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CITY-SY-ZIP	PTD CLARES-PRIETO, NINO 7923 NW 163 TRRA MIAMI LAKES, FL 33016								
TITLE NAME STREET ADDRESS CITY+ST-ZIP	SD CLARES, MARCIA 7923 NW 163 TRRA MIAMI LAKES, FL 33016					U00000684334 04/06/07-80027-022 150.0			
TITLE NAME STREET ADDRESS CITY-S1-ZIP					DO	NOT WRITE			
TITLE NAME STREET ADDRESS CHY-ST-ZIP					IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
indicated of the con	on this report or supplemental report is true a	ind accurate and to to execute this re	that my signature aport as required	shall hav	e the same legal effec	 Florida Statutes. I further certify that the information at as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if 			

Clarer.