

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84436

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: GRAPHO SERVICE CORP.

**Current Principal Place of Business:**

2950 NW 72ND ST  
MIAMI, FL 33147 US

**New Principal Place of Business:**

**Current Mailing Address:**

1200 NW 78 AVE., #216  
MIAMI, FL 33126 US

**New Mailing Address:**

FEI Number: 65-0291637      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

POLTORAK, ESTEBAN A.  
1015 N.W. 106 AVENUE CIR.  
MIAMI, FL 33172 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: D ( ) Delete  
Name: POLTORAK, ESTEBAN,  
Address: 1015 N.W. 106 AVENUE CIR.  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: POLTORAK, CANDIDA  
Address: 1015 N.W. 106 AVENUE CIR.  
City-St-Zip: MIAMI, FL 33172

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 for the exemption stated in Section 119.07(3)(i), 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: ESTEBAN POLTORAK

D

04/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date