

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V07399

FILED  
May 03, 2004  
Secretary of State

**Entity Name:** SOUTHERN REPROGRAPHICS, INC.

**Current Principal Place of Business:**

13018 S.W. 85TH AVENUE ROAD  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

13018 S.W. 85TH AVENUE ROAD  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** 65-0305358

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VEILLEUX, CRAIG  
13018 S.W. 85TH AVE. ROAD  
MIAMI, FL 33156 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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VEILLEUX, CRAIG  
Address: 15631 SW 100 LANE  
City-St-Zip: MIAMI, FL

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

Title: PD (X) Change ( ) Addition  
Name: VEILLEUX, CRAIG  
Address: 15631 SW 100 LANE  
City-St-Zip: MIAMI, FL 33196

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: CRAIG VEILLEUX

PD

05/03/2004

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

\_\_\_\_\_  
Date