2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V56161

1. Entity Name
PRINTING EXPRESSIONS INC.

Principal Place of Business	Mailing Address
1303 WILDCAT CT APOPKA, FL 32712 US	1303 WILDCAT CT APOPKA, FL 32712 US

DO NOT WRITE IN THIS SPACE

04242006   No Chg-P   CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

MARINO, JAMES A., SR.
1303 WILDCAT COURT
APOPKA, FL 32712

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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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2006 Fee will be $550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000534806 05/08/06-80027-011 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PT
NAME	MARINO, JAMES A., SR.
STREET ADDRESS	1303 WILDCAT COURT
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	VS
NAME	MARINO, JANET L.
STREET ADDRESS	1303 WILDCAT COURT
CITY-ST-ZIP	APOPKA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____ James A. Marino Sr 4/15/06   407-886-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #