# I hereby 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 all other like empowered.

PD

SIGNATURE: LANCELOT D. WILLIAMS

Current Principal Place of Business:

Entity Name: LANCE PRINTERS SERVICE, INC.

13220 SW 132 AVE. #9 MIAMI, FL 33186

DOCUMENT# L41305

# **Current Mailing Address:**

14301 SW 192 STREET MIAMI, FL 33177 US

## FEI Number: 65-0163130

## Name and Address of Current Registered Agent:

WILLIAMS, LANCELOT D. 14301 SW 192 ST. MIAMI, FL 33186 US

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

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### Officer/Director Detail :

Title	PD	Title	VD
Name	WILLIAMS, LANCELOT D.	Name	WILLIAMS, SIMONITA
Address	14301 SW 192 STREET	Address	14301 SW 192 STREET
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33177

Electronic Signature of Signing Officer/Director Detail

### FILED Apr 21, 2016 Secretary of State CC2653019850

Certificate of Status Desired: No

04/21/2016

Date