

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000102934

**Entity Name:** REPROGRAPHIC SOLUTIONS, INC.

**Current Principal Place of Business:**

234 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34984

**Current Mailing Address:**

11233 SW SPRINGTREE TERRACE  
PORT ST LUCIE, FL 34987

**FEI Number:** 59-3750636

**Certificate of Status Desired:** No

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

DEMAIO, BRIDGET  
11233 SW SPRINGTREE TERRACE  
PORT SAINT LUCIE, FL 34987 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PVST  
Name DEMAIO, BRIDGET  
Address 11233 SW SPRINGTREE TERRACE  
City-State-Zip: PORT ST LUCIE FL 34987

*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.*

**SIGNATURE:** BRIDGET DEMAIO

PVST

02/28/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date