## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 459684

Country

9. Name and Address of Current Registered Agent

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GWINNUP, JAMES 6470 GARDEN RD

**RIVIERA BCH FL 33404** 

**FILED** Feb 27 1997 8:00am Secretary of State

3a. Date of Last Report

WEST SIDE REPROGRAPHICS, INC. Principal Place of Business Mailing Address 6470 GARDEN ROAD 6470 GARDEN ROAD RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404-6302 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 23 28

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09/16/1974 04/01/1996 4. FEI Number 59-1551849 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees

Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 10. Name and Address of New Registered Agent Name

3. Date Incorporated or Qualified

83 84 City Zip Code

Street Address (P.O. Box Number is Not Acceptable)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE Sign stars, try est or proceed nemeral registered agent and little d'applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96 60 TSD DELETE Ditt 1.1 TITLE Change Addition GWINNUP. DEBORAH NAME 1.2 NAME 123 MORGATE CIRCLE STREET ADDRESS 1.3 STREET ADDRESS ROYAL PALM BCH FL CITY-ST-7IP 1.4 CITY - ST - ZIP ĎΡ DELETE TITLE 21 TITLE Change Addition **GWINNUP, JAMES** 22 NAME 123 MORGATE CIRCLE STREET ADORESS 2.3 STREET ADDRESS ROYAL PALM BCH FL CITY ST-7-P 2 4 CHY-ST-ZIP DELETE BILLE 31 TITLE Change \_\_\_ Addition GOEDMAKERS, THOMAS NAME 3.2 NAME 3769 LIGHTHOUSE DR STREET ADDRESS **3.3 STREET ADDRESS** PALM BCH GARDENS FL CITY - ST - 20F 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS COY-S1-20 4.4 City - St - ZiP DELETE THLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAMI 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CHY-SI-ZIP 6.4 CITY - ST- ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Deborah Gwinnup 561-842-0404