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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J93728

(0)

CUSTOM GRAPHICS INC.

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FILED

Apr 06 1998 8:00am

Secretary of State

Principal Place	e of Business	Mailing Address	Mailing Address					
521 N.E. 34TH		521 N.E. 34TH COURT						
OAKLAND PARK FL 33334		OAKLAND PARK FL 33334				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	THIS SPACE	
						09/23/1987		
2 Principal Pl	lace of Business	2a. Mailing Address	- -			4. FEt Number	1 10	oplied For
21	and or badinoss	26				65-0006001		ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					¢9.75	
22		27				5. Certificate of Status Desired		equired
City & State		City & State				6. Election Campaign Financing	\$5.00	May Po
23		28			Trust Fund Contribution			
Zip	Country	Zip	Countr		•	8. This corporation owes or has paid the		
24	25	29	30			Personal Property Tax due June 30.] No
	Name and Address of Currer	nt Registered Agent	4			10. Name and Address of New Regist	ered Agent	
CAI	rt, steven R.			81	Name			
	3 N.W. 18TH AVENUE			62	Street Add	iress (P.O. Box Number is Not Acceptable)		
FT.	LAUDERDALE FL 33309			~	orest nad	reas (1.0. box Number is Not Acceptable)		
		•		83				
				84	City		05 7m	Code
				04	City		FL 85 Zip	Cone
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	les, the al	pove	-named cor	poration submits this statement for the purp tion's board of directors. I hereby accept the	ose of changing it	s registered
agent. Lar	agistered agent, or both, in the State m fam iliar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, Fl	autnorize orida Stat	a by utes	tne corpora	ation's board of directors. I hereby accept th	e appointment as	registered
SIGNATURE								
	Signature, typed or printed name of registered agn		f : Registered	d Ager	nt signature requ	vired when reinstating))ATE	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICER		
TITLE	P OATH	☐ DELETE	1,1 1 1	TLE			Change	Addition
NAME			: 1.2 N/	ME				
STREET ADDRESS			1.3 \$1	REET	ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			TY-SI	- ZIP			
TITLE	SADT ATTICAL	☐ DELETE	2.1 TO	TLE			L Change	☐ Addition
NAME	CART, STEVEN		2.2 NAME		ľ			
STREET ADDRESS	39 33 N.W. 18TH AVENUE		2.3 STREET ADDRESS		ADDRESS	• · · · · · · · · · · · · · · · · · · ·		
CITY-S1-ZIP	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP		T-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE	☐ DELETE			3.1 TITLE			Change	Addition
NAME			3 2 NAME					
STREET ADDRESS			3.3 ST	REFT A	ADDRESS [•		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		T-ZIP			
TITLE				4.1 TITLE			L Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP		I No per	4.4 CITY - S		- 2 IP			
TITLE		DELETE	5.1 TITLE				☐ Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET #	ADDRESS			
CITY-ST-ZIP			5.4 CI		- ZIP			
TITLE		DELETE	6.1 TIT	LE	1		☐ Change	☐ Add∢ion
NAME	;		6.2 NA	ME	Ì			
STREET ADDRESS			6.3 ST	REET A	ADDRESS			

CITY-ST-ZIP

14. I 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 suppliemental 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.