FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

Mailino Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000042801 (8)

PREPRESS CONSOLIDATED COLOR, INC.

12909 SW 133RD COURT 12909 SW 13RD COURT MIAMI FL 33186 MIAMI FL 33186-5851 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1994 05/01/1996 2. Principal Place of Business 4. FEI Number Mailing Address Applied For 65-0500127 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Country Ziρ Country This corporation has liability for intangible tax under s. 199.032, 29 30 Florida Statutes Yes No 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OSCAR BORSTEN 11548 SW 142ND AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) Penthouse I 83 MIAMI FL 33186 City Zip Code 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. SIGNATURI Signature, typed or printed name of registized agont and title if applicable 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. VSTD DELETE 1.1 TITLE Change Addition TITLE BORSTEN, OSCAR 1.2 NAME NAME **CR2E034** 11548 S.W. 142ND AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL** CITY-S1-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE BORSTEN, LEONARDO 22 NAME NAME 15278 SW 104TH STREET APT 5-22 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2. 4 CITY-ST-ZIP CHY- ST-202 DELETE Change Addition TITLE 3 | TITLE BORSTEN, BENEDICTUS 3.2 NAME NAME 15278 SW 104TH STREET APT. 5-22 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP City - \$1 - ZiP DELETE Change Addition TOLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filling 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 this corporation or the requirer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

appears in Block 12 or Block

STREET ADDRESS City-St-Zip

HE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

2/25/0

(305)378-4470

FILED

Mar 03 1997 8:00am

Secretary of State

mone#