

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION ANNUAL REPORT 1995  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Northam  
 Secretary of State  
 DIVISION OF CORPORATIONS



**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
 95 JAN 17 AM 11:15

**DOCUMENT # S15015 (8)**  
 1. Corporation Name  
**IMAGES GRAPHIC SPECIALTIES, INC.**

Principal Place of Business: **12375-19 S. CLEVELAND FT. MYERS FL 33907**  
 Mailing Address: **12375-19 S. CLEVELAND FT. MYERS FL 33907**

2. Principal Place of Business: **21** Suite, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**  
 2a. Mailing Address: **26** Suite, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified: **11/21/1990**  
 3a. Date of Last Report: **05/01/1994**  
 4. FEI Number: **65-0246030**  
 Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under S 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**HOSE, JOHN F.**  
**12377-2 S. CLEVELAND AVE.**  
**FT. MYERS FL 33907**

10. Name and Address of New Registered Agent  
**81 Name**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**12375-19 S. CLEVELAND AVE.**  
**83**  
**84 City** **FL** **85 Zip Code**

11. Pursuant to the provisions of Sections 607.0503 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of 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 607.0506, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
12-1 NAME	PS HOSE, JOHN F.	13-1 TYPE	PVTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12-2 STREET ADDRESS	6817 FAIRVIEW STREET	13-2 NAME	JOHN HOSE
12-3 CITY & STATE	FT. MYERS FL	13-3 STREET ADDRESS	12375-19 S. CLEVELAND AVE.
12-4 CITY & STATE	FT. MYERS FL	13-4 CITY & STATE	FT. MYERS, FL 33907
12-5 NAME	VI WEAVER, DENNIS E.	13-5 TYPE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12-6 STREET ADDRESS	5340 HARBORAGE DR.	13-6 NAME	DELETE DENNIS WEAVER
12-7 CITY & STATE	FT. MYERS FL	13-7 STREET ADDRESS	
12-8 CITY & STATE	FT. MYERS FL	13-8 CITY & STATE	
12-9 NAME	S DUKE, REBECCA A	13-9 TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-10 STREET ADDRESS	6537 WILLOW LAKE CIRCLE	13-10 NAME	
12-11 CITY & STATE	FT. MYERS FL	13-11 STREET ADDRESS	
12-12 CITY & STATE	FT. MYERS FL	13-12 CITY & STATE	
12-13 NAME		13-13 TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-14 STREET ADDRESS		13-14 NAME	
12-15 CITY & STATE		13-15 STREET ADDRESS	
12-16 CITY & STATE		13-16 CITY & STATE	
12-17 NAME		13-17 TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-18 STREET ADDRESS		13-18 NAME	
12-19 CITY & STATE		13-19 STREET ADDRESS	
12-20 CITY & STATE		13-20 CITY & STATE	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in section 607.0506, Florida Statutes. I further certify that the information included in this annual report or supplemental annual reports is true and accurate and that my signature shall have the same legal effect as if made in the public. That I am an officer or director of the corporation or the manager or trustee responsible to make this report as required by Chapter 177, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report in compliance with an address.

SIGNATURE: *John F. Hose* **JOHN F. HOSE** 1/10/95 813-936-2404  
 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICE OR DIRECTOR