

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

FILED
Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S19043 (6)
 1. Corporation Name
GRAPHIC SYSTEMS INSTALLERS, INC.



Principal Place of Business 2810 PARKWAY ST. LAKELAND FL 33811 US	Mailing Address 2810 PARKWAY ST LAKELAND FL 33811-1380 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/13/1990	3a. Date of Last Report 04/17/1996
21	26	4. FEI Number 65-0236823	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country
24		25	
29		30	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GUTENTAG, ANDREW S 3810 JACQUE LEE LN LAKELAND FL 33803		81 Name ANDREW S. GUTENTAG	85 Zip Code 33803
		82 Street Address (P.O. Box Number is Not Acceptable) 2020 EDGEWOOD DR #46	
		83	
		84 City LAKELAND	FL

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.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	GUTENTAG, SUSAN W. 3810 JACQUE LEE W LAKELAND FL	1.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME SUSAN GUTENTAG	
STREET ADDRESS		1.3 STREET ADDRESS 2020 EDGEWOOD DR #46	
CITY-ST-ZIP		1.4 CITY-ST-ZIP LAKELAND, FL 33803	
TITLE VP	GUTENTAG, ANDREW 2810 JACQUE LEE W LAKELAND FL	2.1 TITLE V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME ANDREW GUTENTAG	
STREET ADDRESS		2.3 STREET ADDRESS 2020 EDGEWOOD DR #46	
CITY-ST-ZIP		2.4 CITY-ST-ZIP LAKELAND, FL 33803	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-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: _____ **4/9/97** **941-644-4277**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)