

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

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Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000090807 (6)**

1. Corporation Name
P S PRINTING AND MARKETING, INC.



Principal Place of Business 240 SOUTH BEACH STREET DAYTONA BEACH FL 32114	Mailing Address 240 SOUTH BEACH STREET DAYTONA BEACH FL 32114
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/02/1995	
21		26		4. FEI Number 59-3288079	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		25			
29		30			

9. Name and Address of Current Registered Agent YOUNG, JAY MARVIN 240 SOUTH BEACH STREET DAYTONA BEACH FL 32114		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	1.1 TITLE	
NAME	YOUNG, JAY MARVIN	1.2 NAME	
STREET ADDRESS	P. O. BOX 187	1.3 STREET ADDRESS	1109 CARMEN AVE
CITY-ST-ZIP	DAYTONA BEACH FL 32115	1.4 CITY-ST-ZIP	HOLLY HILL FL 32117
TITLE	D	2.1 TITLE	
NAME	YOUNG, BARBARA A	2.2 NAME	
STREET ADDRESS	P. O. BOX 187	2.3 STREET ADDRESS	1109 CARMEN AVE
CITY-ST-ZIP	DAYTONA BEACH FL 32115	2.4 CITY-ST-ZIP	HOLLY HILL FL 32117
TITLE	D	3.1 TITLE	
NAME	YOUNG, NICKI A	3.2 NAME	
STREET ADDRESS	P. O. BOX 187	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32115	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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: *Jay M. Young* **JAY M. YOUNG** 1/14/98 904255-2767

CR2E034 (10/97)