

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S62989

**Entity Name:** STRIPEMAN GRAPHIX, INC.

**Current Principal Place of Business:**

5353 RAMONA BLVD  
SUITE 6  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

5353 RAMONA BLVD  
SUITE 6  
JACKSONVILLE, FL 32205 US

**FEI Number:** 59-3076280

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MESSINA, KEVIN  
5353 RAMONA BLVD SUITE 6  
JACKSONVILLE, FL 32205 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title V  
Name BROWN, PAUL L. III  
Address 2519 SHELBY CREEK RD W  
City-State-Zip: JACKSONVILLE FL 32221

Title P  
Name MESSINA, JOHN K  
Address 9175 ORME RD  
City-State-Zip: JACKSONVILLE FL 32220

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEVIN MESSINA

**PRESIDENT**

**04/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date