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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

174257

(6)

## **FILED** Apr 28 1998 8:00am Secretary of State

SEMINO	DLE PAPER & PRINTING C	O., INC.				)) 
Principal Piac	e of Business	Mailing Address				
60 N W 3RD : Miami Fl 331;		60 N W 3RD ST MIAMI FL 33128-1806		DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualified	
	_				06/27/1953	
2. Principal P	lace of Business	2a. Mailing Address	· · · · · ·		4. FEI Number	Applied For
21 Culto Act # etc		26	<u> </u>		59-0694867	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	h—		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State	City & State		# Stortion Comparing Financing	
3		· · · · · ·	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cour	itry	8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	Yes □ No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent
GO	LD\$TON,SIDNEY		1	B1 Name		
60 NW 3RD ST			la la	Street Add	dress (P.O. Box Number is Not Acceptable)	
MIA	MI FL					
			[1	93		
			i ta	34 City		85 Zip Code
					F	
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.						
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Statu	tes.	, ,	
SIGNATURE	Signature, typed or printed name of registered ag	ALOT	C Desistered		uired when reinstaling) OATE	
12.		D DIRECTORS	13.	Agent signature req	oired when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITU	E	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME	GOLDSTON,SIDNEY		1.2 NAN	AE		-
STREET ADDRESS	60 NW 3RD ST		1.3 STR	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL			/-ST-ZIP		
TITLE	TSD	DELETE	2.1 TITL	E		Change Addition
NAME	GOLDSTON, STEVEN 22		2.2 NAN	AE		
STREET ADDRESS	•• ••• •••		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL			Y-ST-ZIP		
TITLE			3.1 TITL	ĺ		Change Addition
NAME			3.2 NAN			
STREET ADDRESS			1	EET ADDRESS		
CITY-ST-ZIP	_ <del>_</del>	T DELETE		Y-ST-ZIP		Change Addition
TITLE		DELETE	4.1 TOTA			☐ Change ☐ Addition
NAME STREET ADDRESS			4 2 NA	EET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.1 TITL	/-ST-ZIP E		Change Addition
NAME			5.2 NAN			
STREET ADDRESS	Ţ			EET ADDRESS		
CITY-ST-ZIP	•			r-ST-ZIP		
TITLE		DELETE	6.1 7171			Change Addition
NAME			6.2 NAN	AE		
STREET ADDRESS			6.3 STR	EET ADORESS		
CITY-ST-ZIP				'-ST-ZIP		
14. I hereby o	certify that the information supplied w	rith this filing does not qualify for	or the exer	nption stated in	n Section 119.07(3)(i), Florida Statutes, I further ure shall have the same legal effect as if made to	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 it made under oath, that I am at 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 changes, ye on any attachment with an address.