Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # 2  1. Corporation Name | 239977 |
|-----------------------------------|--------|
|-----------------------------------|--------|

WILLARD GRAPHICS, INC.

| Princ | cipa | al F           | 'lace d | of Busine     |
|-------|------|----------------|---------|---------------|
| 2999  | N.   | W.             | 32ND    | <b>AVENUE</b> |
| MIAM  | II F | L <sub>3</sub> | 3142    |               |

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

2999 N. W. 32ND AVENUE

MIAMI FL 33142

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

## **FILED** Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90110 020 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

09/02/1960

59-0916794

4. FEI Number

| NAME   JOHNSON, KEVIN   3.2 NAME   3.3 STREET ADDRESS   2999 NW 32 AVENUE   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   MIAMI FL   3.4 CITY-ST-ZIP   TITLE   SCHAEFER, LYNNE   4.2 NAME   SCHAEFER, LYNNE   4.3 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL   Ghange   Additional form of the street address   A.5 STR   | 23             |   | 28              |                       |            |        |                                  | Trust Fund Contribution   | ш               | Added                     | to Fees                   |
|--|----------------|---|-----------------|-----------------------|------------|--------|----------------------------------|---|-----------------|---------------------------|---------------------------|
| JOHNSON, SALLY 2999 NW 32 AVE MIAM! FL 33142  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 agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am Armiliar with, and accept the obligation of the corporation's board of directors. I hereby accept the appointment as registered agent all and accept the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accept the appointment as registered agent all and accept the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accept the appointment as registered agent all and accept the corporation's board of directors. I hereby accept | Zíp            | Country                                   | Zip             |                       | Count      | ry     |                                  | 8. This corporation owes the curr   | ent year Intai  | ngible                    |                           |
| JOHNSON, SALLY 2999 NW 32 AVE MIAMI FL 33142  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the address (P.O. Box Numbor is Not Acceptable)  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the adversariance of the purpose of changing its 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 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the decrease of the purpose of changing its registered office or registered agent and familiar with, and accept the appointment as registered office or protect name of registered agent and first Fatigotically in the purpose of changing its registered office or protect name of registered agent and first Fatigotically in the purpose of changing its registered office or protect name of registered agent and first Fatigotically in the purpose of changing its registered office or registered agent and first Fatigotically in the purpose of changing its registered office or registered agent and first Fatigotically in the purpose of changing its registered office or registered agent and first Fatigotical protection of the purpose of changing its registered office or registered agent and first Fatigotical protections are registered agent and first Fatigotical protections. In the purpose of changing its registered agent and first Fatigotical protections are registered agent and first Fatigotical protections. In the purpose of changi | 24             | 25  | 29              | 30                    | o          |        | 1                                | Personal Property Tax.  |                 | Yes                       | □No                       |
| JOHNSON, SALLY 2999 NW 32 AVE MIAMI FL 33142  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 agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I heroby accept the appointment as registered agent and registered agent agent and registered agent agent and registered agent and registered agent agent and registered agent agent and registered agent agent and registered agent agent agent agent agent and registered agent a |                | 9. Name and Address of Curren             | t Registered    | Agent                 |            |        |                                  | 10. Name and Address of New I   | Registered A    | gent                      |                           |
| 2999 NW 32 AVE MIAMI FL 33142  11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, but corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MIAMI FL 33142  14. City ST. 2P  MIAMI FL 33142  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MIAMI FL 33 SIREET ADDRESS  CITY-ST. 2P  MIAMI FL 31 TITLE  DVP  MAGUFFEY, RICHARD  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  MIAMI FL 31 TITLE  DVP  DELETE  13. TITLE  Change Addit  Addit  Addit  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  INTILE  DVP  DELETE  13. TITLE  Change Addit  Addit  Addit  Addit  Addit  Addit  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  DVP  INTILE  DVP  DELETE  13. TITLE  Change Addit  Addit  Addit  Addit  Addit  Addit  Addit  Addit  Addit  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTILE  Change Addit  Addit |                |   |                 |                       | 8          | 11     | Name                             |   |                 |                           |                           |
| ## MAMI FL 33142  11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the oppointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE   |                |   |                 |                       | -          | 2      | Stroot Addroo                    | s (B.O. Boy Number is Not Asset   | ,<br>abla)      |                           |                           |
| 11. Pursuant to the provisions of Sections 697 0502 and 697 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 697 0502, Florida Statutes, the above-named corporation is board of directors. I heroby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 697 0505, Florida Statutes.  SIGNATURE    Total   |                |   |                 |                       |            | "      | Street Address                   | s (F.O. Box Number is Not Accept  | anie)           |                           |                           |
| 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 registerer 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, 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, or both, in the State of Florida. Statutes.  SIGNATURE    Signature, speed or printed rame of registered agent and site if applicable   NOTE Registered Agent agenture registered agent, or both, in the State of Florida. Statutes.   SIGNATURE   DYP   | MIAI           | MI FL 33142                               |                 |                       | 8          | 3      |                                  |   |                 |                           |                           |
| 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 registerer 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, 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, or both, in the State of Florida. Statutes.  SIGNATURE    Signature, speed or printed rame of registered agent and site if applicable   NOTE Registered Agent agenture registered agent, or both, in the State of Florida. Statutes.   SIGNATURE   DYP   |                |   |                 |                       | -          | _      | <u> </u>                         |   |                 |                           |                           |
| 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature   Signatur |                |   |                 |                       | 8          | 4 1    | City                             |   | FI              | 85 Zip                    | Code                      |
| Signature speed or printed range of registered agent and title of approaches (NOTE Registered Agent signature required when ministating)   DATE  | office or r    | egistered agent, or both, in the State i  | of Florida. Suc | h change was auth     | orized b   | y the  | named corpora<br>e corporation's | ation submits this statement for the s board of directors. I hereby accep | purpose of cl   | nanging its<br>ment as re | s registered<br>egistered |
| 12.  | SIGNATURE      |   |                 |                       |            |        |                                  |   |                 |                           | İ                         |
| TITLE  | 40             |   |                 |                       |            | ent si | gnature required wh              |   |                 |                           |                           |
| NAME MAGUFFEY, RICHARD  STREET ADDRESS  2999 NW 32ND AVE  MIAMI FL 33142  14 CITY-ST-ZP  MIAMI FL 33142  14 CITY-ST-ZP  NAME  JOHNSON, SALLY  STREET ADDRESS  CITY-ST-ZP  MIAMI FL  JOHNSON, KEVIN  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  CITY-ST-ZP  TITLE  JOHNSON, KEVIN  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZP  STREET ADDRESS  CITY-ST |                |   | DIRECTOR        |                       |            |        | 1                                | ADDITIONS/CHANGES TO OF   |                 |                           |                           |
| 1.3 STREET ADDRESS   |                | •••                                       |                 | □ DEFE!E              |            |        |                                  |   |                 | [_] Change                | ☐ Addition                |
| MIAMI FL 33142   |                | ,   |                 |                       | B .        |        |                                  |   |                 | •                         |                           |
| DELETE   D   |                |   |                 |                       | t          |        |                                  |   |                 |                           |                           |
| NAME JOHNSON, SALLY STREET ADDRESS CITY-ST-ZIP MIAMI FL  D D DELETE 31 TITLE 32 AMME JOHNSON, KEVIN 32 NAME JOHNSON, KEVIN 33 STREET ADDRESS CITY-ST-ZIP MIAMI FL  34 CITY-ST-ZIP TITLE SD DELETE 41 TITLE SD DELETE 41 TITLE SCHAEFER, LYNNE 42 NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL  DELETE 41 TITLE STREET ADDRESS CITY-ST-ZIP MIAMI FL  DELETE 51 TITLE 52 NAME 53 STREET ADDRESS CITY-ST-ZIP TITLE 53 STREET ADDRESS CITY-ST-ZIP TITLE 54 CITY-ST-ZIP TITLE 55 STREET ADDRESS CITY-ST-ZIP TITLE 56 STREET ADDRESS CITY-ST-ZIP TITLE 57 STREET ADDRESS CITY-ST-ZIP TITLE 58 DELETE 599 NW 32 AVE. 58 STREET ADDRESS 599 NW 32 AVE. 599 NW 32 AVE. 51 STREET ADDRESS 51 STREET ADDRESS 53 STREET ADDRESS 54 CITY-ST-ZIP NAME 58 STREET ADDRESS 55 STREET ADDRESS CITY-ST-ZIP 56 STREET ADDRESS CITY-ST-ZIP 56 STREET ADDRESS CITY-ST-ZIP 57 ST-ZIP 58 STREET ADDRESS CITY-ST-ZIP 59 STREET ADDRESS CITY-ST-ZIP 50 STREET ADDRESS CITY-ST-ZIP 50 STREET ADDRESS CITY-ST-ZIP 50 STREET ADDRESS CITY-ST-ZIP 51 STREET ADDRESS CI |                |   |                 | C perete              |            |        | IP .                             |   |                 | _=                        |                           |
| STREET ADDRESS   2999 NW 32 AVE.   23 STREET ADDRESS   2 4 CITY-ST-ZIP   | i              | 1   |                 | ☐ DEFEIF              |            |        |                                  |   |                 | Change                    | ☐ Addition                |
| MIAMI FL   | NAME           |   |                 |                       | 2.2 NAME   | Ξ.     |                                  |   |                 |                           | ĺ                         |
| DELETE   D   | STREET ADDRESS |   |                 |                       | 2.3 STREE  | ET AD  | DRESS                            |   |                 | 1                         |                           |
| NAME   JOHNSON, KEVIN   3.2 NAME   3.3 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL   Change   Addit   Ad   |                |   |                 |                       | 2. 4 CITY- | -ST-Z  | 7P                               | ···   |                 |                           |                           |
| STREET ADDRESS   2999 NW 32 AVENUE   | TITLE          | •   |                 | ☐ DELETE              | 3.1 TITLE  |        |                                  |   |                 | Change                    | ☐ Addition                |
| MIAMI FL   SD   DELETE   4.1 TITLE   Change   Addit  | NAME           | · · · · · · · · · · · · ·                 |                 |                       | 3.2 NAME   | •      |                                  |   |                 |                           | ļ                         |
| DELETE   | STREET ADDRESS |   |                 |                       | 3.3 STREE  | ET AD  | ORESS                            |   |                 |                           |                           |
| NAME   SCHAEFER, LYNNE   4.2 NAME   2999 NW 32 AVE.   4.3 STREET ADDRESS   MIAMI FL   4.4 CITY-ST-ZIP  | CITY-ST-ZIP    |   |                 |                       | 3.4. CITY- | ST-Z   | UP                               |   |                 |                           |                           |
| STREET ADDRESS   2999 NW 32 AVE.   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP  | TITLE          |   |                 | ☐ DELETE              | 4.1 TITLE  |        |                                  |   |                 | Change                    | ☐ Addition                |
| A CITY-ST-ZIP  | NAME           | •   |                 |                       | 4. 2 NAME  | E      |                                  |   |                 |                           |                           |
| DELETE   | STREET ADDRESS |   |                 |                       | 4.3 STREE  | ET AD  | ORESS                            |   |                 |                           | J                         |
| NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY- ST- ZIP         5.4 CITY- ST- ZIP           TITLE         □ DELETE         6.1 TITLE         □ Change         □ Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS         CITY- ST- ZIP   | CITY-ST-ZIP    | MIAMI FL                                  |                 |                       | 4.4 CITY-  | ST-ZI  | Р                                |   |                 |                           | . 1                       |
| 5.3 STREET ADDRESS   | TITLE          |   |                 | DELETE                | 5.1 TITLE  |        |                                  |   |                 | Change                    | ☐ Addition                |
|  | NAME           |   |                 |                       | 5.2 NAME   |        |                                  |   |                 |                           |                           |
| TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         • 6.2 NAME         6.2 NAME         • 6.3 STREET ADDRESS         • 6.3 STREET ADDRESS         • 6.4 CITY-ST-ZIP         • 6.4 CITY-ST  | STREET ADDRESS |   |                 |                       | 5.3 STREE  | ET AD  | DRESS                            |   |                 |                           |                           |
| NAME  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  64 CITY-ST-ZIP  | CITY-ST-ZIP    |   |                 |                       | 5.4 CITY-S | ST-ZI  | P                                |   |                 |                           |                           |
| STREET ADDRESS  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP   | TITLE          |   |                 | ☐ DELETE              | 6.1 TITLE  |        |                                  |   | [               | Change                    | Addition                  |
| CITY-ST-ZIP 6.4 CITY-ST-ZIP  | NAME           |   |                 | •                     | 6.2 NAME   |        |                                  |   |                 |                           | ł                         |
|  | STREET ADDRESS |   |                 |                       | 6.3 STREE  | ET ADI | DRESS                            |   |                 |                           |                           |
| 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i) Florida Statutes Litural Section 119.07(3)(ii) Florida Statutes Litural Section 119.07(3)(iii) Florida Flo | CITY-ST-ZIP    |   |                 |                       | 6.4 CITY-5 | ST-ZII | p                                |   |                 |                           | }                         |
| indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same local effect as if made under cath, that I am an  | 14. I hereby c | ertify that the information supplied with | this filing doe | s not qualify for the | e exemp    | tion   | stated in Sect                   | tion 119.07(3)(i), Florida Statutes. I                                    | further certify | that the i                | information               |

officer of 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, with all other like empowered.

CR2E034 (11/98)