

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91103 004 ***150.00

DOCUMENT # 253200

1. Entity Name

DEPENDABLE PRINTING & OFFSET CORP.

Principal Place of Business

1875 WEST 8TH AVE
 HIALEAH FL 33010

Mailing Address

1875 WEST 8TH AVE
 HIALEAH FL 33010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0948602

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPILATO, JILL
11606 SUNFISH WAY
COOPER CITY FL 33026

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME Delete
C
RUBIN, MILTON H
 STREET ADDRESS **1465 LANTANA CT**
 CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE NAME Change Addition
C
RUBIN, MILTON H.
 STREET ADDRESS **2713 PINEHURST DR.**
 CITY-ST-ZIP **WESTON, FL. 33332**

TITLE NAME Delete
P
LOPILATO, JILL
 STREET ADDRESS **11606 SUNFISH WAY**
 CITY-ST-ZIP **COOPER CITY FL**

TITLE NAME Change Addition
P
LOPILATO, JILL
 STREET ADDRESS **8900 NW 34th ST.**
 CITY-ST-ZIP **COOPER CITY FL. 33024**

TITLE NAME Delete
ST
RUBIN, RICHARD
 STREET ADDRESS **21509 HALSTEAD DRIVE**
 CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE NAME Change Addition
ST
RUBIN, RICHARD
 STREET ADDRESS **660 NE BROADVIEW DR.**
 CITY-ST-ZIP **BOCARATON, FL. 33431**

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

Date

305 885 4521

Daytime Phone #

CR2E034 (10/00)