


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 08:00 AM
Secretary of State

DOCUMENT # 342015
 1. Entity Name
KAR PRINTING, INC.



Principal Place of Business 13930 N.W. 60TH AVENUE MIAMI LAKES, FL 33014	Mailing Address 13930 N.W. 60TH AVENUE MIAMI LAKES, FL 33014
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07062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1298858	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LEVY, SCOTT
 13930 NW 60TH AVE
 MIAMI LAKES, FL 33014

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MCCLOSKEY, THOMAS 13930 NW 60 AVE MIAMI LAKES, FL 33014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPS LEVY, SIDNEY 13930 NW 60TH AVE MIAMI LAKES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LEVY, SCOTT 13930 NW 60 AVE MIAMI LAKES, FL 33014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 07/26/04-80012-019 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **July 12-04** **8004459372**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #