

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 21 1997 8:00am
Secretary of State

DOCUMENT # 409782 (0)
1. Corporation Name
PRO-COLOR INC.



Principal Place of Business Mailing Address
801 SOUTH FED'L HWY. 801 SOUTH FED'L HWY.
DANIA FL 33004 DANIA FL 33004

3. Date Incorporated or Qualified 09/19/1972 3a. Date of Last Report 03/08/1996
4. FEI Number 59-1465053 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

SMITH, PAUL J
3150 SW 137 TERRACE
DAVIE FL 33330

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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.

SIGNATURE: PAUL J. SMITH, PRESIDENT
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		11 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	SMITH, PAUL J			12 NAME			
STREET ADDRESS	3150 SW 137 TERRACE			13 STREET ADDRESS			
CITY - ST - ZIP	DAVIE FL			14 CITY - ST - ZIP			
TITLE	SD	<input type="checkbox"/> DELETE		21 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	HOADE, ROBERT P			22 NAME			
STREET ADDRESS	9740 NW 10 ST.			23 STREET ADDRESS			
CITY - ST - ZIP	PEMBROKE PINES FL			24 CITY - ST - ZIP			
TITLE	T	<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	HOADE, ROBERT P.			32 NAME			
STREET ADDRESS	9740 NW 10 ST.			33 STREET ADDRESS			
CITY - ST - ZIP	PEMBROKE PINES FL			34 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY - ST - ZIP				44 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY - ST - ZIP				54 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY - ST - ZIP				64 CITY - ST - ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul J. Smith, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 2/18/97 Daytime Phone # 954-920-6015

CR2E034 (9/96)