## 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** 

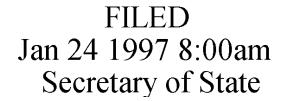
DOCUMENT # 431901

(8)

P & D POLYGRAPHICS, INC.

Principal Place of Business

Mailing Address





823 MANATEE AVENUE. WEST BRADENTON FL 34205			823 MANATEE AVENUE, WEST BRADENTON FL 34205-8646					
					3. Date Incorporated or Qualified 08/01/1973	3a. Date of Last   02/13/1996	Report	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	A	pplied For	
21		26			59-1484437	N	lot Applicable	
Suite, Apt.	#, etc	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional tequired	
City & State	C	City & State			6. Election Campaign Financing		May Be	
Zip	Country	<b>28</b>	Count		Trust Fund Contribution		to Fees	
	} <sub>1</sub>	Country Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24 25 29 29 3. Name and Address of Current Registered Agent			1901	10. Name and Address of New Registered Agent				
RIGI	HAM, JOHN C.		В	1 Name				
	3 71ST ST, NW		8	0 00000	(C.O. Doubleston in No. Accounts	1-1		
	DENTON FL 34209				fress (P.O. Box Number is Not Acceptab	·····		
			8:	3				
			8	4 City		FL 85 Zip	Code	
office or r	registered agent, or both, in the	7.0502 and 607.1508, Florida Statut State of Florida. Such change was obligations of, Section 607.0505, Flo	authorized (	ov the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changing at the appointment a	its registered s registered	
SIGNATURE	200 m							
12,	Signature Typica or printed name of register	red agent and lifte if applicable (NOT S AND DIRECTORS	E: Registered A	gent signature requ	ulred when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	DC IN 12	
Tif({	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change		
NAME	BIGHAM, JOHN C	hand State of	1.2 NAM	1		<u></u>		
STREET ADDRESS	1016 71ST ST N W			et address				
CITY - ST - ZIP	BRADENTON, FL 00000		14 City	- 1				
TITLE		DELETE	2 1 THILE			Change	Addition	
NAME			22 NAM	.				
STREET ADDRESS			23 STAE	ET ADDRESS				
CITY-ST-7:P			2 4 CITY	- ST - ZIP				
TITLE		DELETE	3 1 TITLE			☐ Change	Addition	
NAME			3.2 NAM	:				
STREET ADDRESS			3.3 STRE	et adoress				
CITY-ST-ZIP			3.4. CITY	-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	'		Change	L. Addition	
NAME			4. 2 NAM	E .				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY			p= 1		
TITLE		☐ DELETE	5.1 TITLE	ı		Change	Addition	
NAME			5.2 NAM	l l				
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIF		[7] 5.5.5.2	5 4 CITY			F-1 &:	A 1 10ar	
TITLE		☐ DELETE	6.1 TITLE		•	Change	Addition	
NAME			6.2 NAM	ļ				
STREET ADDRESS			6.3 STRE	et address				
CITY - ST - ZIP			6.4 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 frustee 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: