

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 495828 (6)

1. Corporation Name:

GRAPHIC FINISHERS & BOX CO., INC.



Principal Place of Business

6908 NW 46 ST.
MIAMI FL 33166-5604

Mailing Address

6908 NW 46 ST.
MIAMI FL 33166-5604

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State
23 Country
24

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State
28 Country
29

3. Date Incorporated or Qualified

01/30/1976

3a. Date of Last Report

10/23/1995

4. FEI Number

59-1647241

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

9. Name and Address of Current Registered Agent

GONZALEZ, MIRIAM
4541 S.W. 5TH TERRACE
MIAMI FL 33134

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

Signature typed or printed name of officer or director

NOTE: Registered Agent signature required when changing

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
PD	GONZALEZ, MIRIAM	4541 S.W. 5TH TERRACE	MIAMI FL	☐
TD	MESTRE, ERNESTO	4541 S.W. 5TH TERR.	MIAMI FL	☐
SD	GONZALEZ, ERNEST	840 N.E. 75 ST.	MIAMI FL	☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	15 TITLE	16 NAME	17 STREET ADDRESS	18 CITY-ST-ZIP	19 TITLE	20 NAME	21 STREET ADDRESS	22 CITY-ST-ZIP	23 TITLE	24 NAME	25 STREET ADDRESS	26 CITY-ST-ZIP	27 TITLE	28 NAME	29 STREET ADDRESS	30 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/21/96

305-592-5542

CR2E034 (12/95)