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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| i. Corporation | MENT # 500360 Name AL PRINTING EQUIPMENT | ` ' | | | E ADDIDI DIIIN DENI DENID ENIA BUAN DIRIF | iāli: Bibii bibi: Bibii bibii ilbi |
|--|---|---------------------------------|-------------------------|--|--|------------------------------------|
| | | | | | | |
| Principal Place of Business Mailing Address | | | | | | |
| 6400 POPLAR AVE. 6400 POPLAR AVE. ATT. TAX DEPARTMENT ATT. TAX DEPARTMENT | | | - | | | |
| ATT, TAX DEPARTMENT MEMPHIS TN 38187-1006 | | MEMPHIS TN 38197-1006 | | | DO NOT WRITE IN THIS SPACE | |
| | | | • | | 3. Date Incorporated or Qualified | |
| | | | | | 04/02/1976 | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| 21 | | 26 | | 51-0203721 | Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | City & State | | 6 Floring Open day Figure 1 | <u></u> | |
| 23 | | 28 | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country | Zip | Count | ry | 8. This corporation owes or has paid the | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. | Yes 🔀 No |
| | 9. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Registere | d Agent |
| | CORPORATION SYSTEM | | В | 1 Name | | |
| 1200 S. PINE ISLAND ROAD | | | 8: | 2 Street Ad | Idress (P.O. Box Number is Not Acceptable) | |
| PLANTATION FL 33324 | | | | | | |
| | | | 8: | 3 | | |
| | | | 8 | 4 City | E | 85 Zip Code |
| 11 Pursuant I | to the provisions of Sections 607 050 | 12 and 607 1508 Florida Stat | utes the abo | ve-named co | propration submits this statement for the purpose | of changing its registered |
| office or re | egistered agent, or both, in the State m familiar with, and accept the oblig | of Florida, Such change was | s authorized t | by the corpor | ration's board of directors. I hereby accept the a | ppointment as registered |
| • | m rammar with, and accept the owing | ations bit section cortoos, r | FIOIRIA SIAIUI | us. | | |
| SIGNATURE | Signature, typed or printed name of registered ago | out and fill oif applicable (NC | DI£ Registered A | gent signature rec | gured when reinstaling} DATE | |
| 12. | | D DIRECTORS | | | ADDITIONS/CHANGES TO OFFICERS A | |
| TITLE | PD ACTURE | ☐ DELETE | 1.1 TITLE | | | Change Addition |
| NAME | WALLACE, ARTHUR | | 1.2 NAME | | | |
| STREET ADDRESS | 2 MANHATTANVILLE RD. PURCHASE, NY. | | | E1 ADDRESS | | |
| CITY-ST-ZIP | VO | ☐ DELETE | 1.4 CITY | | | Change Addition |
| TITLE . | GUEDRY, JIM | | 2.1 TITLE 2.2 NAMI | 1 | | Choughde Chyngholi |
| STREET ADDRESS | 2 MANHATTANVILLE RD. | | | FT ADDRESS | | |
| CITY-ST-ZIP | PURCHASE, NY. | | 2 4 City | | | |
| TITLE | SD SD | DELETE | 3.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | NERHEIM, SYVERT E. | | 3.2 NAME | . | | |
| STREET ADDRESS | 2 MANHATTANVILLE RD. | | 3.3 STRE | ET ADDRESS | | |
| CITY-ST-ZIP | PURCHASE, NY. | | 3.4. CITY | - ST - ZIP | | , |
| TITLE | AT | ☐ DELETE | 4.1 TITLE | | | Change Addition |
| NAME | FINNEGAN, JOHN | | 4. 2 NAME | | | |
| STREET ADDRESS | 6400 POPLAR AVENUE | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | MEMPHIS TN | | 4.4 CITY | | | |
| TITLE | 601 NEV EDANIV | DELETE | 5.1 TITLE | | | Change Addition |
| NAME | POLNEY, FRANK 2 MANHATTANVILLE RD. | | 5.2 NAME | | | |
| STREET ADDRESS | PURCHASE, NY. | | | ET ADDRESS | | |
| CITY-ST-ZIP TITLE | AS | ☐ DELETE | 5.4 CITY - 6.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | DOOLITTLE, TRACEY | TOLOGY | | | | |
| STREET ADDRESS | 2 MANHATTANVILLE RD. | | 6.2 NAME | I ADDRESS | | ļ |
| CITY-ST-7P | PURCHASE, NY. | | 6.3 STAL | i | | |

6.4 CITY-ST-ZIP 14. 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 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 trusted 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.