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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

506558

(6)

PRESTIGE PRINTERS OF JACKSONVILLE, INC. Principal Place of Business Mailing Address 8026 WEST BEAVER ST 8026 WEST BEAVER ST JACKSONVILLE, LF 32220 JACKSONVILLE, LF 32220 3a. Date of Last Report 3. Date incorporated or Qualified 07/06/1976 02/09/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1677877 Not Applicable 26 21 Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, $Z_{\rm B}$ Country $Z_{\rm ID}$ Florida Statutes Yes No 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name POPP, RICHARD H Street Address (P.O. Box Number is Not Acceptable) 82 8026 W. BEAVER ST JACKSONVILLE FL 32220 84 Zio Code City 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Styrucine, typicd or printed name of registered agent and the if appreadie (NOTE: Registered Agent signature required when roinstating) (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. VICE-PRESIDENT DELETE ☐ Change 1.1 TITLE 1111 JOHN POPP CR2E034 POPP, RICHARD H 1.2 NAME NAME 8026 W. BPAVER ST 8026 W. BEAVER ST 13 STREET ADDRESS STREET ADDRESS VACKSONVILLE, FL JACKSONVILLE FL 14 CITY - ST - ZIP 011Y-S1-7:F Change ■ Addition DELETE 2 1 TITLE TILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE 3 1 TITLE ☐ Change Addition TIFLE 3.2 NAME NAME 3 3 STREET ADDRESS STREE: ADDRESS 3 4 C(1 Y - ST - ZIP CHIY-ST-ZIP DELETE Change Addition ui,£ 4 1 TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY ST-ZIP ☐ DELETE ☐ Change Addition THTLE 5.1 TiTLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY-ST-ZIP CITY - ST - ZIP ☐ Addition DELETE THEF 6 1 TITLE NAME 62 NAME 6.3 STHEET ADDRESS STREET ADDRESS. 64 CHY-ST-ZIP CHY-SI-7IP 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 earth; 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

GNATURE: Wichard Pols RICHARD POPP FEB 5, 1996 904-786-8395