

FILED
May 13, 2003 8:00 am
Secretary of State

04-23-2003 90306 042 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 506558			
1. Entity Name <i>Prestige Printers of Jacksonville Inc</i>			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <i>8026 West Beaver St.</i>		3. Mailing Address Suite, Apt. #, etc.	
City & State <i>Jacksonville, FL</i>		City & State	
Zip <i>32220</i>	Country	Zip	Country
4. FEI Number <i>59-1677877</i>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <i>Richard Popp</i>			
Street Address (P.O. Box Number Is Not Acceptable) <i>2026 West Beaver Street</i>			
City <i>Jacksonville</i>		FL	Zip Code <i>32220</i>
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Richard Popp</i>		DATE <i>May 9, 2003</i>	
January, or May, Fee is \$150.00 After May, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President Richard Popp 8026 W. Beaver St. Jacksonville, FL 32220</i>	DO NOT WRITE IN THIS SPACE	
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12. 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 report or supplemental 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 10 or on an attachment with an address with all other like empowered.			
SIGNATURE: <i>Richard Popp</i>		4-21-03 904-786-8395	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone	

RICHARD POPP