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PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

4520 W. OHIO AVE.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 579066

GENERAL SCREEN PRINTING, INC.

(2)

Mailing Address 4520 W. OHIO AVE.

FILED May 06 1997 8:00am Secretary of State



4129197

TAMPA FL 33614 US		IAMPA FL 33814-7/16 US				1			
00		00				3. Date Incorporated or Qualified 07/13/1978		e of Last F 5/1996	Report
2. Principal Pi	lace of Business	2s. Mailing Address				4. FEI Number		TA	pplied For
21		26	26			59-1834766		N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	×	•	Additional Required
City & State	e	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Со	untry		8. This corporation has liability for i	ntangible t	ax under !	s. 199.032.
24	25	29	30] Yes 💢		,
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Re	gistered A	gent	
NEUHOFF, PAUL F. 4520 W. OHIO AVE. TAMPA FL 33814				81 Na 82 Str 83		e of Address (P.O. Box Number is Not Acceptable)			
		•		84 Cit	iy		FL	85 Zip	Code
office or re agent. I at SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m tamiliar with, and accept the obt Signature, typed or printed name of registered a	te of Florida. Such change was igations of, Section 607.0505, F	authorize Iorida Sta	ed by the itutes.	corporatio	oration submits this statement for the p on's board of directors. I hereby accep- activation reliabiliting)	ourpose of o of the appo	changing intment as	its registered s registered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	PTD	DELFTE.	1.1 T	TLE		CLD		Change	Addition
NAME	NEUHOFF,PAUL F.		1.2 N	IAME					
STREET ADDRESS	4520 W. OHIO AVE.		135	TREET ADDR	IFSS				
CITY-ST-ZIP	TAMPA FL			CITY-ST-ZIP	ŀ				
TITLE	\$	DELETE	2.1 1				 7	Change	Addition
NAME	NEUHOFF, PAUL F.		221	IAME					
STREET ADDRESS	4520 W. OHIO AVE.	,		THEET ADDR	IESS				
CITY-ST-ZIP	TAMPA FL	•		CITY-ST-ZIF	1				
TITLE	V	DELETE:	311			····		Change	Addition
NAME	GONZALEZ, R.		32 N	LAME				-	
STREET ADDRESS	4520 W. OHIO AVE		1	STREET ADDE	228				
CITY-ST-ZIP	TAMPA FL		- 8	CITY - ST - ZIF					
TITLE		DELFTE	4.1 7		72			Change	Addition
NAME				NAME	Š7	rephen o. Judy		_ •	
STREET ADDRESS				STREET ADDR	_{ess} 45	20 WOHIO AVE			
CITY-ST-ZIP				311Y-S1-20P	177	7MPA, FL 33614	4		
TITLE		DELETE	5.17		V	· · · · · · · · · · · · · · · · · · ·	·	Change	Addilion
NAME		—		NAME	GE	EDFFREY L. NEU HO	ンドド		
STREET ADDRESS				STREET ADDR	42	20 W. OHIO AVE			
				OTY-ST-ZIP		1MPA, FL 33614			
CITY-ST-ZIP TITLE		☐ DELETE	5.4 C		-+ v	J. MATHELL NEVI	INFF	Channe	Addition
NAME		vicest	6.2		45	J. MARTIEW NEUL	ampa	「た」	
STREET ADORESS			635	STREET ADDR	RESS V	DICILLE R. CRATI	32		XADO
CITY-ST-ZIP			1	CITY-ST-7IP	45	20 WIDHID AVE, T	MMO	1. FL	33614
14. I do heret	on indicated on this annual report o	r sudi lemental annual report is	lify for the	exempti accurate	ion stated and that	in Section 119.07(3)(i), Florida Statute my signature shall have the samo lega Las required by Chapter 607, Florida S	s. I further	certify tha	it the inder oath: the