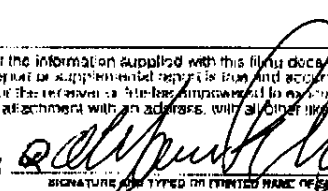


FILED
May 06, 2004 8:00 am
Secretary of State

05-06-2004 90176 012 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 666785			
1. Entity Name: A & D PRINTING CORP			
Principal Place of Business: 100 HIALEAH DRIVE HIALEAH, FL 33010		Mailing Address: 100 HIALEAH DRIVE HIALEAH, FL 33010	
2. Principal Place of Business:		3. Mailing Address:	
Suite Apt # etc:		Suite Apt # etc:	
City & State:		City & State:	
Zip:	Country:	Zip:	Country:
4. FEI Number: 59-1994713		Appraisal Fee: Not Applicable	
5. Certificate of Status Desired: ☐		5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent: RODRIGUEZ, ALFONSO 17511 N.W. 82 CT MIAMI, FL 33015		7. Name and Address of New Registered Agent: Name: Street Address (P.O. Box Number is Not Acceptable): City: State: FL Zip Code:	
8. The above named entity certifies 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: _____ (Signature of holder or officer of registered agent and file with filer) (If not registered agent signature required when re-registering) DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election: Campaign Financing: ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: NAME: STREET ADDRESS: CITY-STATE-ZIP:	PST RODRIGUEZ, ALFONSO 17511 NW 82ND COURT HIALEAH, FL 33015 ☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-STATE-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-STATE-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-STATE-ZIP:	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(i) Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 individual filer as indicated in my report or required by Chapter 607 Florida Statutes and that my name appears in Block 10 or Block 11. If changed, or on an attachment with an address, with a Chief of the empowered.			
SIGNATURE:  Alfonso Rodriguez		Date: 5-1-04 (305) 887-0621	