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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # 673435

1. Corporation Name

WAREHOUSE PRINTING, INC.

Principal Place of Business Mailing Address						
1820 NE 150 ST	r	1820 NE 150 ST	1820 NE 150 ST			
NORTH MIAMI F		NORTH MIAMI FL 33181				DO NOT WRITE IN THE CRACE
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed
						06/13/1980
2. Principal Place of Business 2a. Mailing Add						4. FEI Number Applied For
21		26				59-2004734 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				Certificate of Status Desired Fee.Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip			untry		8. This corporation owes the current year Intangible Personal Property Tax Yes No	
24	25	29	30			Personal Property Tax. Larges VANo 10. Name and Address of New Registered Agent
	g. Name and Address of Curre	nt Registered Agent		81	Name	
ROTI	H, STEVEN					
2020 NORTHWEST 163RD STREET				82	Street	et Address (P.O. Box Number is Not Acceptable)
	E 300			83		
	TH MIAMI BEACH FL 33160					
				84	City	FL 85 Zip Code
44 Pursuant	to the provisions of Sections 607.050	02 and 607.1508. Florida Statu	ites, the a	L	e-named	d 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 or directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOT	E: Registere	d Agen	nt signature r	e required when reinstating) DATE
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DS DELETE 1.1		TTLE		☐ Change ☐ Addition	
NAME	FELDMAN, IRWIN		1.2 NA			
STREET ADDRESS	19430 NE 18TH CT	1.3 \$1		TREET	T ADDRESS	s
CITY-ST-ZIP	MIAMI, FL 00000			1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	PD	☐ DELETÉ	2.1 T			☐ Change ☐ Addition
NAME FELDMAN, STEVEN			2.2 N/			
STREET ADDRESS	1820 NE 150TH ST				TADDRESS	S and the second of the second
CITY-ST-ZIP	MIAMI, FL 00000	□ DELETE	2. 4 (3.1 T	CITY-S	ST-ZIP	Change Addition
TITLE		DCCETE		IAME		
NAME					r adoress	s
STREET ADDRESS						<u> </u>
CITY-ST-ZIP TITLE		☐ DELETE		3.4. CITY-S' 4.1 TITLE		☐ Change ☐ Addition
NAME		_		4. 2 NAME		
STREET ADDRESS			4.3 5	4.3 STREET A		s
CITY-ST-ZIP				CITY-S		
TITLE		☐ DELETE		5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS			5.3 5	TREE	T ADDRESS	s
CITY-ST-ZIP			5.4 0	CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 T	TLE		☐ Change ☐ Addition
NAME			6.2 N	AME		

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 trustee 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 antischment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: >

NAME

STREET ADDRESS

CITY-ST-ZIP

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90008 048 ***150.00