

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995****FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS****APPROVED
AND
FILED****95 MAR 23 AM 10:42****SECRETARY OF STATE
TALLAHASSEE, FLORIDA****DOCUMENT # 683093 (9)**

1. Corporation Name

GRAPHIC EQUIPMENT INTERNATIONAL, INC.

Principal Place of Business

**5626 DEWEY ST. #C
HOLLYWOOD FL 33023**

Mailing Address

**5626 DEWEY ST. #C
HOLLYWOOD FL 33023**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/26/1980

3a. Date of Last Report

06/21/1994

4. FEI Number

59-2020892

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

22

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**DIETZ, DANIEL
8151 NW 15TH ST.
PEMBROKE PINES FL 33024**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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. 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 agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PT

NAME

DIETZ, DANIEL

STREET ADDRESS

8151 NW 15TH STREET

CITY-ST-ZIP

PEMBROKE PINES FL

TITLE

VS

NAME

MONK, LARRY L.

STREET ADDRESS

3244 NW 122ND AVENUE

CITY-ST-ZIP

SUNRISE FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

VS

1.2 NAME

KURGAS, ERIC W.

1.3 STREET ADDRESS

9840 SHERIDAN ST. UNIT 212

1.4 CITY-ST-ZIP

PEMBROKE PINES FL.

2.1 TITLE

TS

2.2 NAME

MONK, LARRY L.

2.3 STREET ADDRESS

3244 NW 122ND AVENUE

2.4 CITY-ST-ZIP

SUNRISE FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☒ Addition☒ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

SIGNATURE:

Eric W. Kurgas**ERIC W. KURGAS****3-17-95****(305) 985-9700**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Telephone Number