**PROFIT** , CORPORATION ANNUAL REPORT 1000



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90052 037 \*\*\*150.00

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DOC 1. Corpo	UMENT	#	847988 OK			

MIDLANE	) LITHOGRAPHING COMPAI	NY					
Principal Place	e of Business	Malling Address					
1841 VERNON ST 1841 VERNON ST N KANSAS CITY MO 64116 N KANSAS CITY MO 64116		l		DO NOT WRITE IN 1	'HIS SPACE		
					3. Date Incorporated or Qualifed 01/19/1981		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied.Fo
21		26	26		44-0512111		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Rec	_	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution			
Zlp	Country 25	Zip 28	Count	ту	This corporation owes the current year     Personal Property Tax.	☐Yes	No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registe	red Agent	
tur:	PRENTICE-HALL CORPORATION	SYSTEM INC	8	1 Name			
1201	HAYS STREET	oronem, mo-	L		ess (P.O. Box Number is Not Acceptable)		
	E 105 Ahassee Fl. 32301		8	13			
	'			64 City		FL 85 Zip C	
11. Pursuant office or r egent. I a	to the provisions of Sections 607.050; registered agent, or both, in the State im familiar with, and eccept the obligat	2 and 607.1508, Florida Statule of Florida. Such change was a tions of, Section 607.0505, Florida Statule of the section 607.0505.	es, the abo uthorized b rida Statute	ove-named corporation by the corporation es.	oration submits this statement for the purpos n's board of directors. I hereby accept the a	a of changing its i ppointment as rag	registered
SIGNATURE	Signature, typed or printed name of registered agen			pent signature requires	when reinsteding) DATI	·	DC (N. 42
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
ти	PO DALIE	☐ DELETE	1.1 1111.2		•		
NAME	ROSENBERG, PAUL		1.2 NAME	E 1			
STREET ADDRESS	1841 VERNON		1	1			
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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 inclosed on this annual report or suppliemental 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 coporation or the received or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 12 or Block 13 if triangled, or or an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST- ZP

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MEN AND THE PROPERTY OF THE DELETE

☐ Addition

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Change