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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **855713** **(4)**

1. Corporation Name

ARCATA GRAPHICS COMPANY

Principal Place of Business	Mailing Address
125 HIGH ST. HIGH ST. TOWER. 23RD FL BALTIMORE MD 21201 US	125 HIGH ST. HIGH ST. TOWER. 23RD FL BALTIMORE MD 21201 US

3. Date Incorporated or Qualified: 03/07/1983
3a. Date of Last Report: 05/22/1995

2. Principal Place of Business	2a. Mailing Address
21 125 High Street	26 125 High Street
Suite, Apt. #, etc. 22 High St. Tower, 23rd Fl.	Suite, Apt. #, etc. 27 High St. Tower, 23rd Fl.
City & State 23 Boston, MA	City & State 28 Boston, MA
Zip / Country 24 02110 / 25 USA	Zip / Country 29 02110 / 30 USA

4. FEI Number: 94-2820401 ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name: N/A
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 required for person designated in Block 9 or Block 10) (Certified Registered Agent Signature required for Internet filing) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD NEVEU, JEAN 612 ST. JACQUES MONTREAL QC	☐ DELETE	1 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY-ST-ZIP	CCD Neveu, Jean	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CAVELL, CHARLES G. 612 ST. JACQUES MONTREAL QC	☐ DELETE	2 1 TITLE / 2 2 NAME / 2 3 STREET ADDRESS / 2 4 CITY-ST-ZIP	VCD Cavell, Charles G.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POIRER, PIERRE 612 ST. JACQUES MONTREAL QC	☐ DELETE	3 1 TITLE / 3 2 NAME / 3 3 STREET ADDRESS / 3 4 CITY-ST-ZIP	Poirier, Pierre	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DAWSON, JAMES A. 125 HIGH ST., HIGH ST. TOWER BOSTON MA	☐ DELETE	4 1 TITLE / 4 2 NAME / 4 3 STREET ADDRESS / 4 4 CITY-ST-ZIP	PCO Dawson, James A	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T POULIN, DANIEL 612 ST. JACQUES MONTREAT QC	☐ DELETE	5 1 TITLE / 5 2 NAME / 5 3 STREET ADDRESS / 5 4 CITY-ST-ZIP	900001817789 -05/13/96--01018--002 ***200.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PAQUETTE, GUY J. 612 ST. JACQUES MONTREAL QC	☐ DELETE	6 1 TITLE / 6 2 NAME / 6 3 STREET ADDRESS / 6 4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 attachment with an address.

SIGNATURE: Guy J. Paquette 04/22/96 (514) 954-0101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)