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

PROFIT CORPORATION ANNUAL REPORT

1998



LUCRIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(2)

CEDENO PRINTING, CORP.

FILED May 15 1998 8:00am Secretary of State



| Principal Plac | e of Business | Mailing Address | | | | (1811 B1811 B1811 B | |
|---|---|---|----------------------|---|--|---------------------|-------------|
| 4315 NW 7TH STREET. STE 15 4315 NW 7TH STREET. S MIAMI FL 33126-3560 MIAMI FL 33126-3560 | | | | | DO NOT WRITE IN THIS | S SPACE | |
| | | | | | 3. Date Incorporated or Qualified | | |
| | | | | | 04/20/1981 | | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | A | oplied For | |
| 21 | | 26 | | 59-2085879 | No | ot Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 | Additional | |
| 22 | | 27 | | 5. Commedia of otatas Desired | Fee Re | equired | |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 | | 28 | | Trust Fund Contribution | Added | to Fees | |
| Ζίρ | Country | — ₇ Уір | Coun | try | 8. This corporation owes or has paid the cu | | ' |
| 24 | 25 9, Name and Address of Curre | nt Registered Apont | 30 | | <u> </u> | | _ No _ |
| | | ili negistered Agent | - | 1 Name | 10. Name and Address of New Registered | Agent | |
| | CEDENO, JORGE | | ` | Name | | | |
| | 50 NW 43 AVE #601 | | Ē | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| MIAMI FL | | | | 13 | | | |
| | | | 1 | " | | | |
| | | | 8 | 4 City | | 85 Zip (| Code |
| 44 Purcuant | to the provincence of Society CO2 OLD | 72 and C07 1509 Florida Ptot. | loo the abo | | poration submits this statement for the purpose of | - | |
| UNICE OF I | re gister ed agent, or both, in the State im f amili ar with, and accept the oblig | r of Fiorida, Such change was | aumonzea | by the comore | ation's board of directors. I hereby accept the ap | pointment as | registered |
| SIGNATURE | | | | | | | |
| 40 | Signature typed or presed has not regelered as | ont and title diapplicable INO ID DIRECTORS | | igent signature requ | u rod when reinstating) DATE | | |
| 12. | D OF ICENS AN | DIRECTORS 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| NAME | CEDENO, JORGE | | 1.2 NAM | | | L. Change | Addition |
| STREET ADDRESS | 750 NW 43 AVE #601 | | | • | | | |
| CITY-ST-ZIP | MIAMI FL | | | ET ADDRESS | | | Į. |
| TITLE | S | DELETÉ | 1.4 CHY 2.1 TITLE | | | Change | Addition |
| NAME | OFFICE OFFICE | | 2.2 NAM | | | Change | L Addition |
| STREET ADDRESS | 750 NW 43 AVE #601 | | 2.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL | | 2.4 CITY-ST-ZIP | | · | | |
| TALE | THE WAY I C | DELETE | 2.4 CHT | | | Change | Addition |
| NAME | | 32 N | | | | La counge | Addition |
| STREET ADDRESS | | | | ET ADDRESS | | | ľ |
| CITY-ST-ZIP | | | 3 4. CITY | | | | |
| TITLE | | DELETE 4.1 TI | | | | Change | Addition |
| NAME | | | 4. 2 NAM | | | onange | , radition |
| STREET ADDRESS | | | | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY | | | | |
| TITLE | | DELETE | 5.1 TITLE | | | Change | Addition |
| NAME | | | 5.2 NAMI | ! | | < | |
| STREET ADDRESS | | | | TT ADDRESS | | | ļ |
| CITY-ST-ZIP | | | 5.4 CITY | | | | |
| TIFLE | | | 6.1 TITLE | | | Change | Addition |
| NAME | | <u> </u> | 6.2 NAMI | | | Change | radiiton |
| STREET ADDRESS | | | | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY | | | | |
| | ertify that the information supplied w | illy this bling does not quality f | | | Section 119 07/3)(i) Florida Statutes I further or | artifu that the | information |

reflects certify that the information supplied with his hing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or frustee 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