

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F47952

1. Entity Name
PRINTECH, INC.



Principal Place of Business

**8135 NW 33 STREET
MIAMI, FL 33122**

Mailing Address

**8135 NW 33 STREET
MIAMI, FL 33122**



04262004 No Chg-P CR2E034 (10/03)

4. FEL Number
59-2135684

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GUERRA, ALFONSO
10430 SW 16 ST
MIAMI FL, FL 33165**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GUERRA, ALFONSO
STREET ADDRESS	10430 SW 16 ST
CITY - ST - ZIP	MIAMI, FL
TITLE	T
NAME	GUERRA, ALMA B.
STREET ADDRESS	10430 SW 16 ST
CITY - ST - ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000135253
04/28/04-80052-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/04

(305) 592-2838