

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F55805

(8)

1. Corporation Name

PALMETTO PRINTING SALES, INC.



Principal Place of Business

8241 S.W. 146TH STREET
PO BOX 500972
MIAMI FL 33158

Mailing Address

8241 S.W. 146TH STREET
PO BOX 500972
MIAMI FL 33158

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 8241 S.W. 146th Street

22 City & State

27 Suite, Apt. #, etc.

23 Zip

Country

28 City & State

MIAMI, FLORIDA

24

25

29 33158

Country

28 U.S.A.

g. Name and Address of Current Registered Agent

PAPY, CHARLES C., III
201 ALHAMBRA CIRCLE, #502
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

11/24/1981

3a. Date of Last Report

06/05/1995

4. FEI Number

59-2144570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

Beverly LINDEN

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

8241 S.W. 146 Street

83

84 City

MIAMI

FL

85 Zip Code

33158

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Beverly Linden

(Signature, typed or printed name of holder of signature and block applicable)

(NOTE: Registered Agent signature required when reinstating)

1/24/96
DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

☐ DELETE

NAME

LINDEN, BEVERLY

STREET ADDRESS

8241 SW 146; POB-500972

CITY-ST-ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

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☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

8241 S.W. 146 Street
MIAMI, FL 33158

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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)(k), 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:

Beverly Linden

BEVERLY LINDEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96

Date

(305) 253-1244

Daytime Phone #

CR2E034 (12/95)