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

Mailing Address

2330 COMMERCE DRIVE

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business
2330 COMMERCE DRIVE

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # F9200000317 (9)

NATIONAL PREMIUM AND MERCHANDISING, INC.

NEW BERLIN W	1 53151	NEW	NEW BERLIN WI 53151-2716									
								3	Date Incorporated or Qualified 11/18/1992		te of Last R IO/1996	
2. Principal Pla	ace of Busin	2a. M	2a. Mailing Address				4	. FEI Number			plied For	
21			26						39-1133200			t Applicable
Suite, Apt. #	t, etc		27 S	Suite: Apt. #, etc.				5	5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State			С	City & State				6	3. Election Campaign Financing		\$5.00	May Be
23			28	28					Trust Fund Contribution		Added t	
Zip	Country Zip				Co	Country			3. This corporation has liability for i			. 199.032,
24					30					Yes No		
		and Address of Curre	ent Register	ed Agent		81	Name	10). Name and Address of New Re	gistered /	\gent	
	MALLOW, JOHN											
1405 SW 6TH COURT						62	2 Street Address (P.O. Box Number is Not Acceptable)					
SUITE H												
POM	PANO BEA	VCH FL 33069				83						
						84	City			FL	85 Zip	Code
11, Pursuant to office or relagent. Far SIGNATURE	o the provisi egistered ag n familiar wi	ions of Sections 607.09 ient, or both, in the Sta th, and accept the obl	002 and 607 le of Florida. Igations of, S	.1508, Florida Statu Such change was Section 607.0505, F	ites, the authorization of the state of the	above ed by atutes	e-named the corp s.	corporati poration's	ion submits this statement for the p s board of directors. I hereby accep		changing it ointment as	s registered registered
	Slgmature, typed	or pualed name of registered a		<u></u>	<u>.</u>		erutangla tri	required wh	ien reinstating)	DATE		
12.	A 9 T	OFFICERS A	ND DIRECT		13				ADDITIONS/CHANGES TO OFFIC	EHS AND		
THLE	CPT	P DIGITIDO A		DELETE	1	TITLE					Change	Addition
NAME						1.2 NAME						
STREET ADDRESS						1.3 STREET ADDRESS						
CITY - S1 - 24P		LD WI 53018		T briefe		CITY-S	T-ZIP				Change	Adding
7111.6	VSD			L DELETE		TITLE					Change	Addition
NAME:		r, KAY W 315 S11				NAME						
STREET ADDRESS		IER PASS			2.3	STREET	ADDRESS					
City · St · 7IP		LD WI 53018				CITY-	ST-ZIP				T 1 05	Adalahan
TITLE	D			☐ DELETE		TITLE					Change	Addition
NAME	COLOMBE, TIMOTHY P					3.2 NAME						
STREET ADDRESS		K AVENUE			3.3	STREET	ADDRESS					
CITY- ST- ZIP		EE WI 53072				CITY-	ST-ZIP					1 1 1 2 2 2 2 2 2
TITLE	VPC			DELETE		TITLE					Change	Addition
NAME		n, John W				NAME						
STREET ADDRESS		rding blvd			4.3	STREET	ADDRESS					
CITY - ST - ZIP	WAUWA	TOSA WI				CITY-S	ST-ZIP				1 0	1 4435.0
THELE	VP-	SALES		☐ DELETE		TITLE					Change	Addition
NAME		MANN, JOHN	J		5.2	NAME						
STREET ADDRESS		A NAMWAM			5.3	STREET	ADDRESS					
CITY-ST-ZiP		E BLUFF, 1		A A		CITY-5	ST - ZIP			····	<u> </u>	
TIFLE	TIAN	T PHOLIL I	TT 000	G G □ DELETE	6.1	TITLE			•		Change	Addition
NAME					6.2	NAME						
STREET ADDRESS					6.3	STREET	ADDRESS					
CITY - ST - ZIP						CITY-S		<u> </u>				u
informatio	in indicated Hicer or dire	on this annual report of	or supplement or the recei	ntal annual report is ver or trustee empo	s true and owered to	d acci	urate and	i that my	Section 119.07(3)(i), Florida Statute signature shall have the same leg- required by Chapter 607, Florida s	al effect as	s if made ur	ider dath; that