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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

F9300000527 (2)

1. (Corporation Name	•	_	_		_	•	_
	INTERACTIVE	GRAPHIC	S	INC).			

Principal Place of Business	Mailing Address
P.O. BOX 2208 ROSWELL GA 30077	P.O. BOX 2208 ROSWELL GA 30077



Principal Place	of Business	Mailing	Address			**************************************) 48 111 48 111 48 111 8	arat artin tinst bille bills
P.O. BOX 22 ROSWELL G			BOX 2208 SWELL GA 30077					
						3. Date incorporated or Qualified	3a. Date of L	ast Report
						02/03/1993	04/0	5/1995
	ace of Business	h	iling Address			4. FEI Number		Applied For
21		26				59-3027566		Not Applicable
Suite, Apt. i	я, etc	27	te, Apt. #, etc.			5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State		F1	y & State			6. Election Campaign Financing	6 I	\$5.00 May Be
23		28				Trust Fund Contribution		Added to Fees
<i>Z</i> ip 24	Country [25]	Z-p		Country		8. This corporation has liability for in Florida Statutes X Yes	. •	ider's 199.032,
24	g, Name and Address of Cur	29 rent Registere		[30] T		10. Name and Address of New R		nt
			T. 11.	81	Name	10, 114111 1111 11	3,010.00.190	
HEDGH	MAN, JERRY			-				
	MPN, JETIN 49TH ST., N., #101			82	Street Add	ress (P.O. Box Number is Not Acceptab	· e)	
	AS PARK FL 34666			83				-
7 (14LLL)	A3 1 ARR 1 E 34000							
				84	City		FL 8	5 Zip Code
SIGNATURE .	ed agent, or both, in the State of Fi th, and accept the obligations of Si Signature by a professions of agreed a					rct of directors. Thereby accept the appointmental of the directors of the	pintment as regi	stered agent. Fani
12.	OFFICERS /	AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFF	CERS AND DIF	RECTORS IN 12
TITLE	СР		DELETE	1.1105F			c	hange 🔲 Addition
NAME	DAVIS, JOHN S			1.2 NAME				
STREET ADDRESS	205 MARKET PLACE, STE	. 104		1.3 STREET	ADDRESS			
CITY - ST - ZIF	ROSWELL GA			1.4 CITY - 5	T - ZIF			
TITLE			□ DELETE	2 1 TII. F			□ c	hange 🔲 Addition
NAME				2.2 NAME				
STREET ADDRESS				2.5 STREET				
TITLE			DELETE	2.4 CITY - S 3.1 TIFLE	T - ZIP		ПС	hange Addition
NAME			L] Directi					nange Add not
STREET ADDRESS				3.2 NAME 3.3 STEEL	L ADVANCES			
City-St-Zip				3.4 City - 5				
TITLE			DELETE	4 1 TIFLE	11 - ZIP			hange 🔲 Addition
NAME				4 2 NAME			.	
STREET ADDRESS				4 3 STHEET	Anngess			
CITY -ST - ZIP				4 4 City 5				
TITLE			DELETE	5 1 111 6			C	hange 🔲 Addition
NAME				5.2 NAME				
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY - SI - ZIP				5.4 OHY - S	3 - 7(P			

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), Fiorida 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 cath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 697, Fiorida Statutes, and that my name appears in Block 12 or Brock 13 if changed, or on an attachment with an address

6 I THE

6.2 NAME

6.3 STREET ADDRESS

€ 4 CITY - ST - ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIF

DELETE.

Dautinie Phone #

Change

☐ Addition