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Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F95000004630
1. Corporation Name
North East Printing Machinery Inc.

Principal Place of Business: 31 Pulpit Rock Rd. Pelham, NH 03076
Mailing Address: 31 Pulpit Rock Rd. Pelham, NH 03076

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9/22/85

4. FEI Number: 04-2809949

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26

22. Suite, Apt. #, etc.: 27

23. City & State: 28

24. Zip: 25 Country: 29

30

9. Name and Address of Current Registered Agent
Philip Hudson III
Baker + MacKenzie
Suite 1600 - Barrett Tower, 701 Brickell Ave
Miami, FL 33131

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligation of, Section 607.05, Florida Statutes.

SIGNATURE: _____ (Name of Registered Agent) _____ (Name of Corporation)

12. OFFICERS AND DIRECTORS

1. TITLE: P-S-T-D
2. NAME: Joseph Korvas II
3. STREET ADDRESS: 81 Pulpit Rock Rd
4. CITY-ST-ZIP: Pelham, NH 03076

5. DELETE

6. TITLE: _____
7. NAME: _____
8. STREET ADDRESS: _____
9. CITY-ST-ZIP: _____
10. DELETE

11. TITLE: _____
12. NAME: _____
13. STREET ADDRESS: _____
14. CITY-ST-ZIP: _____
15. DELETE

16. TITLE: _____
17. NAME: _____
18. STREET ADDRESS: _____
19. CITY-ST-ZIP: _____
20. DELETE

21. TITLE: _____
22. NAME: _____
23. STREET ADDRESS: _____
24. CITY-ST-ZIP: _____
25. DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: _____ Change Addition

2. NAME: _____

3. STREET ADDRESS: _____

4. CITY-ST-ZIP: _____

5. TITLE: _____ Change Addition

6. NAME: _____

7. STREET ADDRESS: _____

8. CITY-ST-ZIP: _____

9. TITLE: _____ Change Addition

10. NAME: _____

11. STREET ADDRESS: _____

12. CITY-ST-ZIP: _____

13. TITLE: _____ Change Addition

14. NAME: _____

15. STREET ADDRESS: _____

16. CITY-ST-ZIP: _____

17. TITLE: _____ Change Addition

18. NAME: _____

19. STREET ADDRESS: _____

20. CITY-ST-ZIP: _____

21. TITLE: _____ Change Addition

22. NAME: _____

23. STREET ADDRESS: _____

24. CITY-ST-ZIP: _____

25. TITLE: _____ Change Addition

26. NAME: _____

27. STREET ADDRESS: _____

28. CITY-ST-ZIP: _____

29. TITLE: _____ Change Addition

30. NAME: _____

31. STREET ADDRESS: _____

32. CITY-ST-ZIP: _____

33. TITLE: _____ Change Addition

34. NAME: _____

35. STREET ADDRESS: _____

36. CITY-ST-ZIP: _____

37. TITLE: _____ Change Addition

38. NAME: _____

39. STREET ADDRESS: _____

40. CITY-ST-ZIP: _____

41. TITLE: _____ Change Addition

42. NAME: _____

43. STREET ADDRESS: _____

44. CITY-ST-ZIP: _____

45. TITLE: _____ Change Addition

46. NAME: _____

47. STREET ADDRESS: _____

48. CITY-ST-ZIP: _____

49. TITLE: _____ Change Addition

50. NAME: _____

51. STREET ADDRESS: _____

52. CITY-ST-ZIP: _____

53. TITLE: _____ Change Addition

54. NAME: _____

55. STREET ADDRESS: _____

56. CITY-ST-ZIP: _____

57. TITLE: _____ Change Addition

58. NAME: _____

59. STREET ADDRESS: _____

60. CITY-ST-ZIP: _____

61. TITLE: _____ Change Addition

62. NAME: _____

63. STREET ADDRESS: _____

64. CITY-ST-ZIP: _____

65. TITLE: _____ Change Addition

66. NAME: _____

67. STREET ADDRESS: _____

68. CITY-ST-ZIP: _____

69. TITLE: _____ Change Addition

70. NAME: _____

71. STREET ADDRESS: _____

72. CITY-ST-ZIP: _____

73. TITLE: _____ Change Addition

74. NAME: _____

75. STREET ADDRESS: _____

76. CITY-ST-ZIP: _____

77. TITLE: _____ Change Addition

78. NAME: _____

79. STREET ADDRESS: _____

80. CITY-ST-ZIP: _____

81. TITLE: _____ Change Addition

82. NAME: _____

83. STREET ADDRESS: _____

84. CITY-ST-ZIP: _____

85. TITLE: _____ Change Addition

86. NAME: _____

87. STREET ADDRESS: _____

88. CITY-ST-ZIP: _____

89. TITLE: _____ Change Addition

90. NAME: _____

91. STREET ADDRESS: _____

92. CITY-ST-ZIP: _____

93. TITLE: _____ Change Addition

94. NAME: _____

95. STREET ADDRESS: _____

96. CITY-ST-ZIP: _____

97. TITLE: _____ Change Addition

98. NAME: _____

99. STREET ADDRESS: _____

100. CITY-ST-ZIP: _____

14. I hereby certify that the information reported herein is true and correct and that the 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 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; that I am the person designated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changes to officers and directors with an address.

SIGNATURE: _____ DATE: 5-18-98

603-635-1995

CR2E034 (10/97)