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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95446

(3)

BAYSHORE GRAPHICS, INC.

Principal Place of Business Mailing Address 2058 NW MIAMI CT. 2058 NW MIAMI CT. MIAMI FL 33127 MIAMI FL 33127-4820 3. Date Incorporated or Qualified 3a. Date of Last Report 08/13/1982 05/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2222056 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zic 8. This corporation has liability for intangible tax under s. 199.032, 25 30 Florida Statutes Yes No 24 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name NENEZIAN, JOHN 550 FALCON AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI SPGS, FL 33166 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title. Lapplicable (NOTE: Registered Agent signature regulred when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 96/6) I-ILE DELETE 11 TITLE Change Addition NENEZIAN, JOHN E. 1.2 NAME NAME CR2E034 550 FALCON AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI SPRINGS FL CHY SI 12 1.4 CITY-ST-ZIP DELETE Change Addition 1-116 21 TITLE NENEZIAN, VIRGINIA NAME 22 NAME 2054 N.W. MIAMI COURT STREET AUDRESS 2.3 STREET ADDRESS MIAMI FL OHY-\$1-26 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 1111 NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS CHY-51-7-2 3.4. CITY- \$T-ZIP DELETE Addition ___ Change Tiltel 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CHY SI-72 4.4 CITY-ST-ZIP DELETE 5 1 TITLE Addition THE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS 5.4 CITY+ST-ZIP 0.17 ST 7 3 DELETE 6.1 TITLE Addition 1:11.6 HAME 6.2 NAME STREET ACIDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST-ZIP 01"Y ST-76

SIGNATURE:

appears in Block 12 or Block

PRESIDENT

pried, or on an attachment with an address.

14. I do 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 arms all 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 fram 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

4/30/97 305-576-0154

FILED

May 12 1997 8:00am

Secretary of State