FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 Oct 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT **CORPORATION** Sandra B. Mort Secretary of State ANNUAL REPORT Secretary of Sta ATIONS 1998 DIVISION OF CORPOR DOCUMENT # F97000003524 (2) MAGAZINE GRAPHICS INC. Principal Place of **Magazine Graphics** 67 WOODLAND 356-4 Prestwick Circle WESTWOOD NJ DO NOT WRITE IN THIS BPACE Palm Beach Gardens, FL 33418 3. Date Incorporated or Qualified 07/08/1997 2. Principal Place of Business
356-4 PIESTWICK C12 2a. Mailing Address 4. FEI Number Applied For 22-2411021 Not Applicable Suite, Apt. #, etc. Suite, Apr. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes ☐ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WOOD, RAYMOND C 356-4 PRESTWICK CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 83 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or protest rame of registered agent and tibe if applicable (NOTE. Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIFLE DELETE 1.1 1111 Change Addition WOOD, RAYMOND C NAME 1.2 NAME 356-4 PRESTWICK CIRCLE STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL CITY - S1 - 7If 1.4 CITY - ST - ZIP DELETÉ TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 City - S1-7IP CITY - \$1 - 7/P IIILE DELETE 3.1 1ff LE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y - ST - Z)P DELETE THU Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54CITY-S1-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - S1 - ZIP

14. Thereby cartify 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 armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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. ammound

SIGNATURE:

(10/97