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Jan 14 1997 8:00am

Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G04586** (5)

1. Corporation Name
(YES) PRINTING AND COURIER SERVICES, INC.

Principal Place of Business
2601 SOUTH BAYSHORE DR.
TENTH FLOOR
MIAMI FL 33133
US

Mailing Address
726 SANTANDER AVE.
CORAL GABLES FL 33134-6525



3. Date Incorporated or Qualified 10/14/1982
3a. Date of Last Report 01/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

4. FEI Number 59-2337579
Applied For Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPENCER, THOMAS R., JR
801 BRICKELL AVENUE
SUITE 1901
MIAMI FL 33131

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME BERMELO, WILLY A.
STREET ADDRESS 4801 ORDUNA DRIVE new address=
CITY-ST-ZIP CORAL GABLES FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 2601 Granada Boulevard
1.4 CITY-ST-ZIP Coral Gables, FL. 33134-5549

TITLE DT ☐ DELETE
NAME BERMELO, GUILLERMO R.
STREET ADDRESS 726 SANTANDER AVENUE
CITY-ST-ZIP CORAL GABLES, FL 00000

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DS ☐ DELETE
NAME BERMELO, DAISY
STREET ADDRESS 4801 ORDUNA DRIVE new address=
CITY-ST-ZIP CORAL GABLES FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2601 Granada Boulevard
3.4 CITY-ST-ZIP Coral Gables, FL. 33134-5549

TITLE DEVP ☐ DELETE
NAME AJAMIL, LUIS
STREET ADDRESS 2601 S BAYSHORE DR., 10TH FLOOR
CITY-ST-ZIP MIAMI FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 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.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR

January 8th, 1997 (305) 859 2050

Date Daytime Phone #

CR2E034 (9/96)