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 #

(2)

MY PRINTER, INC.

FILED Mar 13 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address		-	
669-2ND LANE VERO BEACH FL 32662		105 12TH PLACE SE VERO BEACH FL 32962-5728				
US				3. Date Incorporated or Qualified 02/14/1983	3a. Date of Last Report 05/01/1996	
	ace of Business	2a. Mailing Address	L Lane,	4. FEI Number 59-2261935	Applied For	
Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	4 miles	39-220 1933	Not Applicable	
22	#, 0to.	27		Certificate of Status Desired	Fee Required	
City & State		City & State	^:	6. Election Campaign Financing	\$5.00 May Be	
23		28 Vero 15e	ach.tL	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in		
24	25	29 32462 3	0	T TOTTOG DESCRICTO	Yes No	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Reg	Jistered Agent	
GARRIS, CHARLES E.						
	BEACHLAND BLVD. D. BOX 3406		B2 Street Addr	ess (P.Ö. Box Number is Not Acceptab	ie)	
	0 BCH. FL 32964		83			
VEN	O BOTIL I E OESOT			:		
			B4 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above-named corp	oration submits this statement for the p	urpose of changing its registered	
t office or r	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Horida. Such change was au	fhorized by the comorati	ion's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE	in terminal that the dozoft the own	genore of occurrence of records				
SIGNATURE	Signature, typed or praited name of registereo a		Rog steled Agent signature require		DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD TEDDY	☐ DELETE	1.1 TIBLE	· ·	Change	
NAME	MYERS, TERRY L		1.2 NAME	•		
STREET ADDRESS	105 12TH PLACE SE VERO BEACH, FL 0		1.3 STREET ADDRESS			
CITY-ST-ZIP	TSD BEACH, FL U	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
TITLE	WARD, ELIZABETH L	ב וייניים ב	2.2 NAME			
NAME STREET ADDRESS	105 12TH PLACE SE		2.3 STREET ADORESS			
1	VERO BEACH, FL 0		2 4 CHY-S1-ZIP			
CITY-ST-ZIP TITLE	0	DELETE	3.1 TOLE		Change Addition	
NAME	WARD, ELIZABETH A		3.2 NAME			
STREET ADDRESS	2200 OAK DR		3.3 STREET ADDRESS			
CITY-ST-ZIP	FT PIERCE, FL 00000		3.4 CITY-S1-ZIP			
TITLE	VD	☐ DELETE	4.1 Title		Change Addition	
NAME	NEGHERBON, JOHN		4. 2 NAME			
STREET ADDRESS	5995 23RD ST		4.3 STREET ADDRESS			
CITY-ST-ZIP	VERO BCH FL		4.4 CITY - ST - 7(P			
TITLE		DELFTE DELFTE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE	·	☐ DELETE	6.1 TALE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		The second secon	6.4 CHY-S1-7IP	7.00	14	
14. I do here!	by certify that the information suppli	ed with this filing does not qualify.	for the exemption stated	in Section 119.07(3)(i), Florida Statutes	 I turther certify that the 	

Information indicated on this armuel 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.