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FILED

Mar 05 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 # G54994

(0)

1. Corporation Name

S & R BLUE PRINTING, INC.

Principal Place of Business

5133 CENTRAL AVE  
ST. PETERSBURG FL 33710  
US

Mailing Address

5133 CENTRAL AVE  
ST. PETERSBURG FL 33710-8140  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified  
08/19/1983

3a. Date of Last Report  
02/13/1996

4. FEI Number

59-2334832

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

SANTELLI, EVELYN F.  
1 KEY CAPRI 513 W  
TREASURE ISLAND FL 33708

(Died 11/26/96)

10. Name and Address of New Registered Agent

81 Name

Patrick Santelli

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

1 Key Capri 513 W

83

Treasure Island,

84 City

FL

85 Zip Code

33706

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 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 Patrick Santelli

2/25/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE  
NAME SANTELLI, EVELYN F.  
STREET ADDRESS 1 KEY CAPRI 513 W (Died 11/26/96)  
CITY-ST-ZIP TREASURE ISLAND FL

TITLE ST ☐ DELETE  
NAME SANTELLI, PATRICK  
STREET ADDRESS 1 KEY CAPRI 513 W  
CITY-ST-ZIP TREASURE ISLAND FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME Patrick Santelli  
1.3 STREET ADDRESS 1 Key Capri 513 W  
1.4 CITY-ST-ZIP Treasure Island, FL 33706

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

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 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 person authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on the attached statement of address.

SIGNATURE: Patrick Santelli

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-25-97 (813) 360-6651

Date

Daytime Phone

CR2E034 (9/96)