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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

G78750

(8)

IVAN'S QUIK PRINT, INC.

FILED

Mar 26 1998 8:00am

Secretary of State

| Principal Place of Business Mailing Address | | | | | | |
|---|--|-------------------------------|------------------|---|--|-----------------------------------|
| 2022 HOLLYWOOD BLVD 2022 HOLLYWOOD BLVD HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 | | | | | DO MOT WOLTE IV | TIU0 00105 |
| • | | | | | DO NOT WRITE IN | THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified 01/16/1984 | |
| | lace of Business | 2a. Mailing Addres | 5 | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 59-2413260 | Not Applicable |
| Suite, Apt. | | Suite, Apt. #, et | c. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | e | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Cou | ntry | 8. This corporation owes or has paid t | |
| 24 | 25 | [29] | 30 | | Personal Property Tax due June 30 | |
| 10.0 | 9. Name and Address of Curre | nt Hegistered Agent | | 81 Name | 10. Name and Address of New Regis | reued Wäeur |
| | YDEN, IRIS | | | Name | | |
| | 0 B RIARWOOD CR DLLYWOOD FL 33024 | | Ī | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| nu | JULTWOOD PL 33024 | | | 83 | | |
| | | | į | <u> </u> | | |
| | | | | 84 City | | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508. Florida | Statutes, the ab | ove-named cor | poration submits this statement for the purp | |
| office or r | egistered agent, or both, in the State m familiar with, and accept the oblic | e of Florida. Such change | was authorized | by the corpora | tion's board of directors. I hereby accept the | ne appointment as registered |
| | in raminal with, and accept the oblig | gations of, Section 607.03 | OS, FIORIDA SIAN | 1105. | | |
| SIGNATURE | Signature, typed or printed name of registered ag | gent and title if applicable. | (NOTE Registered | Agent signature requi | ired when reinstating) | DATE |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICER | S AND DIRECTORS IN 12 |
| TITLE | OP . | ☐ DELE | TE 1.1 TIT | LE | | Change Addition |
| NAME | WYDEN, IRIS | | 1.2 NA | ME | | |
| STREET ADDRESS | 450 BRIARWOOD CIRCLE | | 1.3 STI | REET ADDRESS | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | | Y-ST-ZIP | | |
| TITLE | | ☐ DELE | TE 2.1 TIT | LE | | Change Li Addition |
| NAME | | | 2.2 NA | ME | | |
| STREET ADDRESS | | | 2.3 \$1 | REET ADDRESS | | |
| CITY-ST-ZIP | | T or r | | Y-ST-ZIP | <u></u> | Change E Addition |
| TITLE | | [_] DELE | • | | | Change Addition |
| NAME | | | 3.2 NA | | | |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CiTY-ST-ZIP | | ☐ DELE | | IY-ST-ZIP | | Change Addition |
| TITLE | | OELE | 4.1 III | | | Fit Avends Fit suggitted) |
| NAME ETREET ADDRESS | | | | | | |
| STREET ADDRESS | | | | REET ADORESS | | |
| CITY-ST-ZIP TITLE | | ☐ DELE | | Y-ST-ZIP | | Change Addition |
| NAME | | _ Ditt | 5.2 NA | i | | |
| | | | | REET ADDRESS | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP TITLE | | DELE | | Y-ST-ZIP | | ☐ Change ☐ Addition |
| NAME | | _ J.C.C | 6.2 NA |] | | |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY.ST.7IP | | | | V- \$1-7IP | | |

14. Thereby 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.

AIANIATURE.