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Apr 29 1997 8:00an
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mor
Secretary of S
DIVISION OF CORPORATIONS

DOCUMENT # **G95576** **(6)**

1. Corporation Name
STAMPRITE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1462 SW 12 AVENUE **POMPANO BCH. FL 33069**	**1462 SW 12 AVENUE** **POMPANO BCH. FL 33069-4703**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Co 29 / 30

3. Date Incorporated or Qualified	3a. Date of Last Report
04/10/1984	04/30/1996

4. FEI Number
59-2440182
☐ 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

HUGHES, M DANIEL, ESQUIRE
3000 N FEDERAL HWY, BLDG TWO, STE 200
FT. LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

Name: JEFFERY WRIGHT
Street Address (P.O. Box Number is Not Acceptable): 1462 SW 12 Avenue
City: POMPANO BEACH FL 85 Zip Code: 33069

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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] 4/23/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	DP	☐ DELETE
NAME	WRIGHT JEFFERY	
STREET ADDRESS	1462 SW 12 AVENUE	
CITY-ST-ZIP	POMPANO BCH. FL	
TITLE	DST	☐ DELETE
NAME	WRIGHT, PAULA	
STREET ADDRESS	1462 SW 12 AVENUE	
CITY-ST-ZIP	POMPANO BEACH 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	
11 / 12 / 13 ADDRESS / 14 ZIP	☐ Change ☐ Addition
21 / 22 / 23 ADDRESS / 24 ZIP	☐ Change ☐ Addition
31 / 32 / 33 ADDRESS / 34 ZIP	☐ Change ☐ Addition
41 / 42 / 43 ADDRESS / 44 ZIP	☐ Change ☐ Addition
51 / 52 / 53 ADDRESS / 54 ZIP	☐ Change ☐ Addition
61 / 62 / 63 ADDRESS / 64 ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

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] 4/23/97 954-946-6155