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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

H45327

(4)

DOCUMENT # 1. Corporation Name

KRAFT PRINTING CO.

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Principal Place	. .	Administration of the second				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Bet Militis Militis illikt
		Mailing Address							
1913 NE 10		1913 NE 16TH TE	ERR			t t			
P.O. BOX 2	2447U RDALE FL 33307	P.O. BOX 24470 FT. LAUDERDALE	FI 30307						
FI. ENOUS	ADALL TE SOUT	TI: DOODLIGHEE	. () 000/			3. Date Incorporated or Qualified 03/04/1985	3a. Date	of Last F)5/01/1	leport 995
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				59-2484666			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.7	5 Additional
22		27				3. Comments of Clares Decires		Fee	Required
City & State	9	City & State				6. Election Campaign Financing	<u></u>	\$5.0	0 May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip		intry		8. This corporation has liability for		x under s	199.032,
24	25	29	30	,			S No		
	g. Name and Address of Curre	ent Registered Agent				10. Name and Address of New I	Registered /	agent	
				81	Name				
KULAT	tz, conrad s.			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
633 S	e 3rd avenue								
SUITE	4R			83					
FT. LA	AUDERDALE FL 33301			84	City			85 Z	ip Code
				•	Oity		FL		
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508 Florida Sta	atutes, the abo	ove n	named corpora	ation submits this statement for the pu	rpose of cha	nging its	registered office
or register	red agent, or both, in the State of Fic ith, and accept the obligations of, Se	inda, Such change was auth ction 607 0505. Florida Stati	iorized by the i utes.	corpo	oration's boar	d of directors. I hereby accept the app	oomment as	regisiere	u agent. i am
	ial, and doops are on gallone or, co								
SIGNATURE	Signature, typed or printed hance of registeres ag-	ct and the trapplication	NOTE Brighteen	Ager	1.s grature required) when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF			
TITLE	DP	☐ DELETE	1 13	πι€			[Change	Addition
NAME	REED, WILLIAM F.		12 N	IAME					
STREET ADORESS	1913 NE 16TH TERR		13S	TREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		140	HIY-S	1 - 20P				
	ST								Addition
TITLE	01	☐ DELETE	2 1 7	TITLE			[Change	
	REED, DOROTHY S	☐ DELETE		TITLE AME			[Change	
NAMÉ	:	☐ DELETE	221	,AME	ADDRESS		[Change	
NAME STREET ADDRESS	REED, DOROTHY S 2108 NE 62ND COURT	☐ DELEIE	22 h 23 S	AME TREET	1		Γ	Change	
NAME STREET ADDRESS CITY-ST-Z)P	REED, DOROTHY S		22 h 23 S 24 C	,AME	1			Change	Addition
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certify that the information indicated on this armual 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96 954-564-8194

CR2E034 (12/95)