

# AMENDED

## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H74737

1. Entity Name

D & B PRINTING, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

00 OCT 17 PM 2:08

Principal Place of Business

Mailing Address

2. Principal Place of Business

5460 N. STATE RD. 7

3. Mailing Address

5460 N. STATE RD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#109

#109

City & State

City & State

Ft. Lauderdale, FL

Ft. Lauderdale

Zip

Country

Zip

Country

33319

US

33319

US

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2567125

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name ABACO EXECUTIVE SERVICES, INC.

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

5440 N. STATE RD. #7, STE. #201

City FT. LAUDERDALE

FL

Zip Code 33319

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

10-11-00

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME GINTER, DOUGLAS STEPHEN  
STREET ADDRESS 6 AUGUSTA AVENUE  
CITY-ST-ZIP N. PROVIDENCE, RI 02904 ☒ Delete

TITLE PRESIDENT  
NAME SNYDER, MICHAEL STANLEY  
STREET ADDRESS 7260 S.W. 14 STREET  
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068 ☒ Change ☐ Addition

TITLE D  
NAME SARAVO, ROBERT ALAN  
STREET ADDRESS 6 AUGUSTA AVENUE  
CITY-ST-ZIP N. PROVIDENCE, RI 02904 ☒ Delete

TITLE VICE-PRESIDENT  
NAME SNYDER, KATHY JEAN  
STREET ADDRESS 7260 S.W. 14 STREET  
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kathy Snyder - V President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/11/00

Date

954-497-1083

Daytime Phone #

CR2E034 (500)