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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

## **FILED** Feb 05 1998 8:00am Secretary of State

(9)SCREENPRINT SERVICES, INC. Principal Place of Business Mailing Address 1362 N. KILLIAN 1362 N. KILLIAN DRIVE LAKE PARK FL 33403 LAKE PARK FL 33403 DO NOT WRITE IN THIS SPACE US US 3. Date Incorporated or Qualified 11/26/1985 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2667392 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zìp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. √ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WARD, PATRICK T. 1322 S. KILLIAN DR. 82 Street Address (P.O. Box Number is Not Acceptable) LAKE PARK FL 33403 83 84 City Zip Code F 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 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change WARD, DIANA NAME 1.2 NAME R2E034 10409 TRAILWOOD CIRCLE STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change Addition 2.1 TITLE TITLE WARD, PATRICK T 2.2 NAME NAME 10409 TRAILWOOD CIR. STREET ADDRESS 2.3 STREET ADDRESS Jupiter FL 33478 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change \_\_\_ Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

561-842-4076