

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

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J75377 (8)
1. Corporation Name
M PRINT, INC.

Principal Place of Business
530 N RIDGEWOOD AVE
DAYTONA BEACH FL 32114
US

Mailing Address
% FRANCES MOISIO
613 MARINA POINT DR.
DAYTONA BEACH FL 32114-5041

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/01/1987	
21	Suite, Apt. #, etc.	26	530 N. Ridgewood Ave.	4. FEI Number 59-2808304	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	
23	Zip	28	Daytona Beach, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
25	Country	30	Volusia		

9. Name and Address of Current Registered Agent MOISIO, FRANCES 613 MARINA POINT DR. DAYTONA BEACH FL 32114		10. Name and Address of New Registered Agent	
81	Name	82	Street Address (P.O. Box Number is Not Acceptable) 1415 Ocean Shore Blvd.
83		84	#107
85	City	86	Ormond Beach, FL
87	Zip Code	88	32176

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D MOISIO, RICHARD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	613 MARINA POINT DR.	1.2 NAME	
STREET ADDRESS	DAYTONA BEACH FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PTD MOISIO, FRANCES	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	613 MARINA POINT DR	2.2 NAME	
STREET ADDRESS	DAYTONA BEACH FL	2.3 STREET ADDRESS	1415 Ocean Shore Blvd #107
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Ormond Beach, FL 32176
TITLE	VD MOISIO, KEVIN C.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	869 WHIPPOORWILL DR.	3.2 NAME	
STREET ADDRESS	PORT ORANGE FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	SD MOISIO, RICHARD S.	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1415 OCEANSHORE BLVD 107	4.2 NAME	
STREET ADDRESS	ORMOND BEACH FL	4.3 STREET ADDRESS	220 Hidden Hills Dr.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Ormond Beach, FL 32174
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 _____

CFR2E034 (10/97)