FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 J86098 **DOCUMENT #** DIXIE PRINTING & LETTERPRESS, INC. Mailing Address Principal Place of Business 2300 N. DIXIE HWY. 2300 N. DIXIE HWY. W. PALM BCH. FL 33407 W. PALM BCH. FL 33407 3a. Date of Last Report 3. Date Incorporated or Qualified 01/24/1995 08/01/1987 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-2829752 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 26 23 8. This corporation has liability for intangible tax under s. 199.032, Ζφ Country Country Ζφ Yes No 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) CARPENTER, CHERYL B 82 230 ROYAL PALM WAY 83 PALM BEACH FL 33480 Zip Code 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agont signature required which renstating) Signature, typed or printed name of registered agent and title if epplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change DELETE 1 1 TOTLE TITLE CARPENTER, CHERYL B 1.2 NAME NAME 401 WILMA CIR. 1.3 STREET ADDRESS STREET ADDRESS RIVIERA BCH. FL 33404 1.4 CITY - \$1 - ZIP CITY-ST-ZIP ☐ Change DELETE 2 1 TITLE TITLE ALGERI, RONALD J. 2.2 NAME NAME 4744 HOLLY LAKE DRIVE 2.3 STREET ADDRESS STREET ADDRESS

Addition Addition LAKE WORTH FL 33463 24 CITY - S1 - ZIP CITY-ST-ZIP ncitibbA [☐ Change DELETE 3.1 THE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIF CHY-ST-7P ☐ Addition Change DELETE 4 1 1/TLE TITLE NAME 4.3 STHEET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TOTLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Change Addit:on DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - S1 - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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 in hanged, or on an attachment with an address.

CICNATURE.

GNATURE AND VPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 1/10/91 407/65

CR2E034 (12/95)