FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

[illegible] 95 [illegible] 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K28654** **(7)**

1. Corporate Name
R.E.J. GRAPHIC CORP.

Principal Place of Business
3337 NW 74 AVE
MIAMI FL 33122

Mailing Address
3337 NW 74 AVE
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/18/1988**
3a. Date of Last Report: **07/05/1994**

2. Principal Place of Business
21
Suite, Apt. #
22
City, State
23
24 25

2a. Mailing Address
26
Suite, Apt. #
27
City, State
28
29 30

4. FEI Number: **65-0063879**
Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. Does corporation qualify for exemption under s. 119.07(3) Florida Statutes? ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

JIMENEZ, RAFAEL E.
13227 SW 43 LANE
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name
82 Street Address, P.O. Box Number is Not Acceptable
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and/or 607.0506 Florida Statutes, the above named corporation submits the 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. Hereby accept the appointment as registered agent. I am familiar with and hereby accept the obligations of section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	JIMENEZ, RAFAEL E.
STREET ADDRESS	13227 SW 43 LANE
CITY, ST, ZIP	MIAMI FL
TITLE	DT
NAME	JIMENEZ, MAGALY
STREET ADDRESS	13227 SW 43 LANE
CITY, ST, ZIP	MIAMI FL
TITLE	DVT
NAME	RIESGO, LAZARA O
STREET ADDRESS	6218 SW 147 COURT
CITY, ST, ZIP	MIAMI FL
TITLE	DS
NAME	JIMENEZ, ELIZABETH
STREET ADDRESS	13227 SW 43 LANE
CITY, ST, ZIP	MIAMI FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME	RIESGO, LAZARO	
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same force and effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Florida Statutes; and that my name appears above, or on an attachment with all other like empowered officers and directors, as an officer or director of the corporation.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/95 305-477-6532

0120300 CP