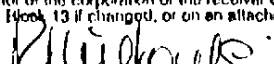


FILED
May 19 1998 8:00am
Secretary of State

FROTH CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS		May 19 1998 8:00 Secretary of State	
DOCUMENT # L45790 (7) 1. Corporation Name DRW GRAPHICS COMMUNICATIONS, INC.					
Principal Place of Business 1126 94TH AVE. NO. ST. PETERSBURG FL 33702 US		Mailing Address 1126 94TH AVE. NO. ST. PETERSBURG FL 33702-0437 US			
2. Principal Place of Business 21 7882 Sailboat Key Blvd Suite, Apt. #, etc. 22 #501 City & State 23 South Pasadena, FL Zip 24 33707		2a. Mailing Address 26 6860 Gulfport Blvd So Suite, Apt. #, etc. 27 #306 City & State 28 St. Petersburg, FL Zip 29 33707		3. Date Incorporated or Qualified 01/24/1990 3a. Date of Last Report 05/01/1997 4. FEI Number 60-2997021 Applied For Not Applicable 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 8. Date of Last Report 05/01/1997 9. Additional Fee Required \$0.75 May Be Added to Fees \$5.00 10. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 11. Yes ☐ No ☒	
9. Name and Address of Current Registered Agent WILKOWSKI, DAVID 1126 94TH AVE. NO. ST. PETERSBURG FL 33702				10. Name and Address of New Registered Agent 11. Name 12. Street Address (P.O. Box Number is Not Acceptable) 6860 Gulfport Blvd So 13. City #306 St. Petersburg FL 14. Zip Code 33707	
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 agent, 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 Separate type for each name of officer or director of the corporation. (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY- ST- ZIP 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY- ST- ZIP 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY- ST- ZIP 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY- ST- ZIP 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY- ST- ZIP 21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY- ST- ZIP 25. TITLE 26. NAME 27. STREET ADDRESS 28. CITY- ST- ZIP 29. TITLE 30. NAME 31. STREET ADDRESS 32. CITY- ST- ZIP 33. TITLE 34. NAME 35. STREET ADDRESS 36. CITY- ST- ZIP 37. TITLE 38. NAME 39. STREET ADDRESS 40. CITY- ST- ZIP 41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY- ST- ZIP 45. TITLE 46. NAME 47. STREET ADDRESS 48. CITY- ST- ZIP 49. TITLE 50. NAME 51. STREET ADDRESS 52. CITY- ST- ZIP 53. TITLE 54. NAME 55. STREET ADDRESS 56. CITY- ST- ZIP 57. TITLE 58. NAME 59. STREET ADDRESS 60. CITY- ST- ZIP 61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY- ST- ZIP 65. TITLE 66. NAME 67. STREET ADDRESS 68. CITY- ST- ZIP 69. TITLE 70. NAME 71. STREET ADDRESS 72. CITY- ST- ZIP 73. TITLE 74. NAME 75. STREET ADDRESS 76. CITY- ST- ZIP 77. TITLE 78. NAME 79. STREET ADDRESS 80. CITY- ST- ZIP 81. TITLE 82. NAME 83. STREET ADDRESS 84. CITY- ST- ZIP 85. TITLE 86. NAME 87. STREET ADDRESS 88. CITY- ST- ZIP 89. TITLE 90. NAME 91. STREET ADDRESS 92. CITY- ST- ZIP 93. TITLE 94. NAME 95. STREET ADDRESS 96. CITY- ST- ZIP 97. TITLE 98. NAME 99. STREET ADDRESS 100. CITY- ST- ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY- ST- ZIP 5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY- ST- ZIP 9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY- ST- ZIP 13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY- ST- ZIP 17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY- ST- ZIP 21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY- ST- ZIP 25. TITLE 26. NAME 27. STREET ADDRESS 28. CITY- ST- ZIP 29. TITLE 30. NAME 31. STREET ADDRESS 32. CITY- ST- ZIP 33. TITLE 34. NAME 35. STREET ADDRESS 36. CITY- ST- ZIP 37. TITLE 38. NAME 39. STREET ADDRESS 40. CITY- ST- ZIP 41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY- ST- ZIP 45. TITLE 46. NAME 47. STREET ADDRESS 48. CITY- ST- ZIP 49. TITLE 50. NAME 51. STREET ADDRESS 52. CITY- ST- ZIP 53. TITLE 54. NAME 55. STREET ADDRESS 56. CITY- ST- ZIP 57. TITLE 58. NAME 59. STREET ADDRESS 60. CITY- ST- ZIP 61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY- ST- ZIP 65. TITLE 66. NAME 67. STREET ADDRESS 68. CITY- ST- ZIP 69. TITLE 70. NAME 71. STREET ADDRESS 72. CITY- ST- ZIP 73. TITLE 74. NAME 75. STREET ADDRESS 76. CITY- ST- ZIP 77. TITLE 78. NAME 79. STREET ADDRESS 80. CITY- ST- ZIP 81. TITLE 82. NAME 83. STREET ADDRESS 84. CITY- ST- ZIP 85. TITLE 86. NAME 87. STREET ADDRESS 88. CITY- ST- ZIP 89. TITLE 90. NAME 91. STREET ADDRESS 92. CITY- ST- ZIP 93. TITLE 94. NAME 95. STREET ADDRESS 96. CITY- ST- ZIP 97. TITLE 98. NAME 99. STREET ADDRESS 100. CITY- ST- ZIP		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained 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. 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:  4-28-98 (813) 368-00					