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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **L59975** **(7)**

1. Corporation Name
MBA GRAPHICS, INC.

Principal Place of Business	Mailing Address
201 KELSEY LANE TAMPA FL 33619	201 KELSEY LANE TAMPA FL 33619

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
03/26/1990	05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 351 Thornton Rd.	26 351 Thornton Rd.
Suite, Apt. #, etc 22 Suite 107	Suite, Apt. #, etc 27 Suite 107
City & State 23 Lithia Springs GA	City & State 28 Lithia Springs, GA
Zip / County 24 30057 / 25 USA	Zip / County 29 30057 / 30 USA

4. FEI Number: 59-2999449 — ☐ 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

6. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PAPY, CHARLES C. III 201 ALHAMBRA CIRCLE SUITE 502 CORAL GABLES FL 33134	81 Name: Ronald B Evans 82 Street Address (P.O. Box Number is Not Acceptable): 128 Bessemer Circle 83 84 City: Brandon FL 85 Zip Code: 33511

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: Ronald B Evans — 5/25/95
*Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandated) — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP	11 TITLE	☐ Change ☐ Addition
NAME	BERGER, MAX	12 NAME	
STREET ADDRESS	1011 COTORRO AVENUE	13 STREET ADDRESS	
CITY ST ZIP	CORAL GABLES FL	14 CITY ST ZIP	
TITLE	~~DVS~~	21 TITLE	☐ Change ☐ Addition
NAME	~~MANDT, RICHARD D.~~	22 NAME	
STREET ADDRESS	~~116 ADALIA AVENUE~~ Remove	23 STREET ADDRESS	
CITY ST ZIP	~~TAMPA FL~~	24 CITY ST ZIP	
TITLE	~~DS~~	31 TITLE	☐ Change ☐ Addition
NAME	~~MANDT, JOSEPH D.~~ } REMOVE	32 NAME	
STREET ADDRESS	~~519 N. GADSDEN STREET~~	33 STREET ADDRESS	
CITY ST ZIP	~~TALLAHASSEE FL~~	34 CITY ST ZIP	
TITLE	DPS	41 TITLE	☐ Change ☐ Addition
NAME	ADERHOLD, DAVID	42 NAME	
STREET ADDRESS	5005 CHAPEL CROSSING	43 STREET ADDRESS	
CITY ST ZIP	DOUGLASVILLE GA	44 CITY ST ZIP	
TITLE	VP/S/T	51 TITLE	☐ Change ☒ Addition
NAME	Ronald B Evans	52 NAME	
STREET ADDRESS	128 Bessemer Circle	53 STREET ADDRESS	
CITY ST ZIP	Brandon, FL 33511	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST 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)(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: Ronald B Evans — 5/25/95 — 404 941-4333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Ronald B Evans

0298447 CP