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

PROFIT CORPORATION ANNUAL REPORT

PRINTER DEPOT INC.



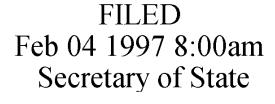
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

1997 DOCUMENT # L66894





Principal Place of Business		Mailing Address	~	· · · · · · · · · · · · · · · · · · ·	T ESSENDEN DEN BRIEG BREEF FEING LOUR HERF	7 LEBRIDAN DID BUND ONEN ARMO BUND BURN BURN BURN BURN BURN BURN BURN BURN		
% REINALDO HERNANDEZ 7278 NW 66 ST MIAMI FL 33166		% REINALDO HERNANDEZ 7278 NW 66 ST						
MIPUMI PL 331		MIAMI FL 33166-3008			3. Date Incorporated or Qualified 04/19/1990	3a. Date of 04/02/1		
	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21	#	26			65-0189959		Not Applicab	
Sulte, Apt.	Suite, Apt. #, etc.	.te, Apt. #, etc.		5. Certificate of Status Desired	1 1 '	3.75 Additional Fee Required		
City & Stat	te	City & State			6. Election Campaign Financing		5.00 May Be	
23		28			Trust Fund Contribution		Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i			
24				30 Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Re	jistered Agent	<u>'</u>	
	RNANDEZ, REINALDO			81 Name				
	'8 NW 66TH ST VMI FL 33166		82 Street Address		dress (P.O. Box Number is Not Acceptab	le)		
MIN	WII FL 33100			83				
				84 City		FL 85	Zip Code	
Office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblice.	e of Florida. Such change was :	authorizei	d by the corpor	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of chan	l iging its registered ent as registered	
SIGNATURE	Signature, typed or printed han a of registered ag	,			quirb¢ when reinslating)	DATI	<i></i>	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN 12	
TITLE	DPS	DELETE	1.1 10	HE [□ c	hange 🔲 Additio	
NAME	HERNANDEZ, REINALDO		1.2 N/	IME				
STREET ADDRESS	7278 NW 66TH ST		1351	REFT ACORESS				
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TITLE NAME	ļ	ے میروند	2.1 11	1		LJV	hange 🔲 Addilio	
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CITY-ST-ZIP TITLE	 	DELETE	6.1 T/I	IY-ST-ZIP		Пс	hange Additio	
NAME			6.2 NA	ì	80000207	'91 TE		
STREET ADDRESS				REET ADDRESS	-02/05/97010 ***165.00	73043,		
CITY-ST-ZIP				IY-SI-ZIP	***165.00	17:	3 24	
14. I do herel	by certify that the information supplies	ed with his filing does not quali	fy for the	exemption state	ed in Section 119.07(3)(i), Florida Statules	. I further certi	ly that the	
informatio I am an o appears i	on indicated on this annual report of officer of director of the corporation in Block 12 or Block 13 if allanged, o	Supplemental annual report is to the receiver or trude empower or on an attachment with an add	rue and a vered to a dress.	ccurate and th xecule this rep	at my signature shall have the same lega ort as required by Chapter 607, Florida S	effect as if ma atules; and tha	de under oath; that my name	
SIGNAT	URE:	W TO			1/27/97 3	W 59	31090	