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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90050 005 ***150.00

DOCUMENT # L77516

NU-PRINTS, INC.

								<u> </u>	6 (6
Principal Place of Business Mailing Address					1 1001101	i a nt erath i nce l ation the			
•		3712 E 3RD ST	12 E 3RD ST						
		PANAMA CITY FL 32401				DO NOT WRIT	E IN THE	SDACE	
					3 Date Incorp	orated or Qualifed	<u> </u>	JI AGE	
					05/30/19	_			
2. Principal Pl	ace of Business	2a. Mailing Address		-	4. FEI Number			A	pplied For
21		26			59-30124	21		N	ot Applicable
Suite, Apr. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			\$8.75 Additional	
22		27	27		J. Jeruida, Granda Desired			Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing			\$5.00 May Be	
23		28			Trust Fund Contribution Added to -ees				
Zip Count y		Zip	¬ ' -¬			ation owes the curre	ent year Int	angible Yes	[]No
24	9. Name and Address of Curre		0		Personal Pr	Address of New R	egistered		
	9. Name and Address of Curr	tegistered Agent	81	Name	To: Hama tila				
CCRBIN, BILL A.							hi-\		
305 FANNIN AVE			82	Street Add	Iress (P.O. Box Yum	iber is Not Accepta	ible)		
BLOUNTSTOWN FL 32424			83						
			0.4	Oit.				85 Zip	Code
			84	City			F1_	. 63 210	0000
SIGNATURE:	m familiar with, and accept the oblig	gent and title if applicable. (NOTE R			ed when reinstating)	CHANGES TO OF	DATE FICERS AN	ID DIRECTO	OR 5 IN 12
12.					ADDITIO 15/	SHANGES TO OFF	HOLKS A	Change	Addition
TITLE NAME	DP CORBIN KENNETH E		1.2 NAME					_ ,	
STREET ADDRESS	3712 E 3RD ST			ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL		1,4 CITY-S						
TITLE	DS	DELETE	2,1 TITLE					☐ Change	☐ Addition
NAME	CORBIN MARGARET M		2.2 NAME						
STREET ADDRESS	3712 E 3RD ST		23 STREET	TADDRESS					Ì
CITY-ST-ZIP	PANAMA CITY FL		2. 4 CITY-S	ST-ZIP					
THTLE		☐ DELETE	3.1 TITLE					☐ Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS				TADDRESS					ł
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP					Change	Addition
TITLE		C perete	4.1 IIILE 4.2 NAME					onange	
NAME									
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME			5 2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-Z/P			54 CITY-S	T-ZIP		<u></u>			
		☐ DELETE	6.1 TITLE					☐ Change	Addition
NAME			62 NAME						

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify to 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 uniter 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

MARGIARET M. Corbin 4/3/99