


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

9 APR -2 PM 1:43

**FILING FEE \$ 188.75** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company **DOCUMENT # L97000000874**

**AMERICAN INTERNATIONAL GRAPHICS LLC**  
 12870 S.W. 116 STREET  
 MIAMI FL 33186

1a. Principal Place of Business Address  
 12870 S.W. 116 STREET  
 MIAMI FL 33186

2 Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified  
 08/11/1997

3a. State of Formation  
 FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

☐ Applied For

City & State

City & State

65-0775688

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report  
 03/04/1998

6. Certificate of Status Desired  
☒ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

**CABALLERO, ALBERT J**  
 12870 S.W. 116 STREET  
 MIAMI FL 33186

8. Name and Address of New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

**FL**

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

**MEM**  
**MG**  
**MEM**  
**MEM**

**CABALLERO, ALBERT J**  
**CHAVEZ, TREIMA E**  
**CABALLERO, WANDA M**

**12870 S.W. 116 STREET**  
~~**9623 S.W. 134 PLACE**~~  
**12870 SW 116 STREET**

**MIAMI FL**  
~~**MIAMI FL**~~  
**MIAMI FL**

11. I do hereby certify that the information supplied with this filing 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

**SIGNATURE:** *Albert J. Caballero* **ALBERT J. CABALLERO**

**03/29/1999 305 383 7208**

SIGNATURE AND TITLE OF REGISTERED AGENT OR SECRETARY MUST APPEAR ON THIS FORM

File

Date of Filing