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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M 1106 PRINTLAND CORPORATION

3 7 2 3 537230 - 90228 - 48

Principal Place of Business

Mailing Address

12101 S.W. 114 PLACE

DO NOT WRITE IN THIS SPACE

FILED

Secretary of State

05-10-1999 90228 048 \*\*\*150.00

May 10, 1999 8:00 am

MAMI, 1033110			3. Date Incorporated or Qualified 212.185		
2. Principal Place of Business	2a. Mailing Address	W DIAG	4. FEI Number	,	Applied For
21 12101 S.W. 114 PARE 26 12101 S.W. 1146		114 FUNCE	34-7201001		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	1 1 '	1.75 Additional Fee Required
City & State  AM1 7L	City & State 28 MIAMI, 70		Election Campaign Financing     Trust Fund Contribution		5.00 May Be added to Fees
24 33176 Country A	29 7 L33116 30 L	I.SA	8. This corporation owes or has pa Personal Property Tax due June		
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
RICHARD GUREVIIZ		81 Name			
		82 Street Address (P.O. Box Number is Not Acceptable)			
		83		-	
MIAMI, 7033116		84 City		FL 85	
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. Thereby accept the appointment as registered					

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DIRECTOR / PRESIDENT ☐ Addition TITLE ... DELETE 1 1 TITLE ☐ Change RICHARD GUREVITZ 12 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 75715W 150 ST 1 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition DIRECTOR I SECRETARY 2.1 TITLE TITLE 22 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 5.1 TITLE ☐ Change TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE ■ DELETE 6 1 TITLE Addition 62 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 6 4 CITY - ST - ZIP

14. Thereby 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 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 pranged, or on an attachment with an address.

6UREVITZ

CR2E034 (10/97)