

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
J. Mark Martin
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -1 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M15020 (4)

1. Corporation Name
PALMETTO PRINTING, INC.

Principal Place of Business % LINDA SALISBURY 10700 S.W. 116TH STREET MIAMI FL 33176	Mailing Address % LINDA SALISBURY 10700 S.W. 116TH STREET MIAMI FL 33176
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/06/1985	3a. Date of Last Report 03/22/1994
4. FEI Number 59-2535122	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 8875 SW 131 STREET	2a. Mailing Address 26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Miami, FL	28 City & State
24 Zip 33176	29 Zip
25 Country	30 Country

9. Name and Address of Current Registered Agent
**SALISBURY, LINDA
10700 S.W. 116TH ST.
MIAMI FL 33176**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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: *Linda Salisbury* **LINDA SALISBURY** **2/21/95**
(Signature of Registered Agent or Secretary of Corporation) (Name of Registered Agent or Secretary) (Date)

12. OFFICERS AND DIRECTORS

111 NAME D	112 NAME SALISBURY, C. DAVID
113 STREET ADDRESS 10700 S.W. 116TH ST.	114 CITY - ST - ZIP MIAMI FL
121 NAME DS	122 NAME SALISBURY, LINDA
123 STREET ADDRESS 10700 S.W. 116TH ST.	124 CITY - ST - ZIP MIAMI FL
131 NAME	132 NAME
133 STREET ADDRESS	134 CITY - ST - ZIP
141 NAME	142 NAME
143 STREET ADDRESS	144 CITY - ST - ZIP
151 NAME	152 NAME
153 STREET ADDRESS	154 CITY - ST - ZIP
161 NAME	162 NAME
163 STREET ADDRESS	164 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
121 STREET ADDRESS 8875 S.W. 131 STREET
122 CITY - ST - ZIP Miami, FL 33176
131 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
132 STREET ADDRESS 8875 S.W. 131 STREET
133 CITY - ST - ZIP Miami, FL 33176
141 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
142 STREET ADDRESS
143 CITY - ST - ZIP
151 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
152 STREET ADDRESS
153 CITY - ST - ZIP
161 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
162 STREET ADDRESS
163 CITY - ST - ZIP

14. I 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)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Linda Salisbury* **LINDA SALISBURY** **2/21/95** **305-253-2444**
(Signature of Registered Agent or Secretary) (Name of Registered Agent or Secretary) (Date) (Telephone Number)