FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

Amended 6/1/95

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JUL 12 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M24553 (3)

1. Corporation Name
COMMUNIPRINT CORP.

Principal Place of Business	Mailing Address
4344 SW 73rd Avenue Miami, FL 33155	4344 S.W. 73rd Ave. Miami, FL 33155

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/09/85
3a. Date of Last Report: 3/17/95

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 59-2690356 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Hammond, Joseph A.
118 Sumac Street
Philadelphia, PA 19128

10. Name and Address of New Registered Agent

81 Name: Tompkins, Valerie
82 Street Address (P.O. Box Number is Not Acceptable): 11601 Biscayne Blvd., Ste. 301
83
84 City: Miami, FL 85 Zip Code: 33181

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: Valerie J. Tompkins, Esq. DATE: 6/13/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: DP Hammond, Joseph A. 118 Sumac Street Philadelphia, PA 19128	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP: ☒ Change ☐ Addition President/Treasurer Tarves, Vincent J. 18775 S.W. 238th Street
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: V Tarves, Vincent Jr. 4344 S.W. 73 Ave. Miami, FL 33155	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP: ☒ Change ☐ Addition Vice President Edgman, Robert T. 1022 S.W. 78th Place Miami, FL 33144
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP:	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP: ☒ Change ☐ Addition Chairman of the Board/Secretary Hammond, Joseph A. 118 Sumac Street Philadelphia, PA 19128
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP:	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP: ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP:	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP: ☐ Change ☐ Addition 500001537015 -07/13/95--01057--019 *****61.25 *****61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: TJS 7/12/95	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP: ☐ Change ☐ Addition

14. I do 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)(k), 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 changed, or on an attachment with an address.

SIGNATURE: Vincent J. Tarves Jr. 6/6/95 305-266-8500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #