

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M39994** (2)

1. Corporation Name

PUBLISHING SYSTEMS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

**2441 N.W. 83RD. AVE
#108
MIAMI FL 33174
US**

**2441 N.W. 83RD. AVE
#108
MIAMI FL 33174
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip 33172 Country

28 Zip 33172 Country

9. Name and Address of Current Registered Agent

**MICHAEL W. WEAD
8431 N.W. 197TH TENACE
MIAMI FL 33015**

3. Date Incorporated or Qualified

10/12/1986

3a. Date of Last Report

07/17/1995

4. FET Number

59-2740912

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature of person making this statement (must be typed)

Signature of Agent (must be typed)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSD**
NAME **WEAD, MICHAEL W.**
STREET ADDRESS **8431 NW 197TH TERR**
CITY-ST-ZIP **MIAMI FL**

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ 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 or person 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: **Michael W. Wead** **MICHAEL W WEAD** 1/24/96 305-715-9455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

CR2E034 (12/95)