

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 31, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # M81890**

1. Entity Name  
**DANIEL'S OFFSET PRINTING, INC.**



Principal Place of Business

% STEVEN L. GRIMES  
7404 S.W. 41ST ST.  
MIAMI, FL 33155

Mailing Address

% STEVEN L. GRIMES  
7404 S.W. 41ST ST.  
MIAMI, FL 33155 US



08272007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0048472**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

GRIMES, STEVEN L.  
7404 S.W. 41ST ST.  
MIAMI, FL 33155

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME GRIMES, STEVEN L.  
STREET ADDRESS 7404 S.W. 41ST ST.  
CITY-ST-ZIP MIAMI, FL 33155

TITLE ST  
NAME GRIMES, SUSAN C.  
STREET ADDRESS 7404 S.W. 41ST ST.  
CITY-ST-ZIP MIAMI, FL 33155

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

U000000773172  
08/31/07-80003-019 550.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SUSAN C. GRIMES 8/27/07 305-261 3263