

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000056168

1. Entity Name

**LIQUID GRAPHICS, INC.**

FILED

02 SEP 13 PM 3:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1435 S. UNIVERSITY DRIVE

3. Mailing Address

1435 S. UNIVERSITY DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PLANTATION, FL

City & State

PLANTATION, FL

4. FEI Number

65-1014455

Applied For

Not Applicable

Zip

33324

Country

USA

Zip

33324

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

VERONICA VARGAS

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

1435 S. UNIVERSITY DRIVE

City

PLANTATION

FL

Zip Code

33324

**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.

SIGNATURE

VERONICA VARGAS

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLSON, MARK 1435 S. UNIVERSITY DRIVE PLANTATION, FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200007899802--6 -09/20/02--01065--016 ****300.00 ****300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VARGAS, VERONICA 1435 S. UNIVERSITY DRIVE PLANTATION, FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

CR2E034B (12/01)

13. I hereby 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

VERONICA VARGAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-723-9552

Daytime Phone #

272

**Liquid Graphics, Inc.**  
**1435 S. University Drive**  
**Plantation, FL 33324**

---

8-27-02

Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

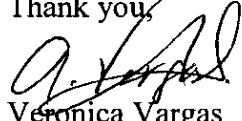
Re: P00000056168

To Whom It May Concern:

Please be advised that the address of my corporation has changed and I never received my 2001 UBR.

I have enclosed a blank report that I have filled out, along with the filing fees for 2001 and 2002. Please reinstate my corporation and update my information.

Thank you,



Veronica Vargas  
Vice President