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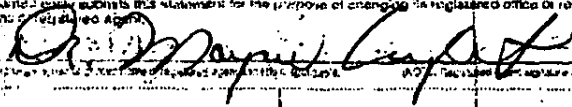
Southwest Professional

15/5/

FILED
Jun 15, 2004 8:00 am
Secretary of State

05-10-2004 90477 045 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P01000067222				66428215	
1. Entity Name CHRISTO PRINT, INC.					
Physical Place of Business 202 3RD STREET PORT MYERS, FL 33907		Mailing Address 202 3RD STREET PORT MYERS, FL 33907			
2. Principal Place of Business		3. Mailing Address			
State, Apt. #, etc.		State, Apt. #, etc.			
City & State		City & State			
Zip Country		Zip Country			
		04202004 Chg-P		CR2E034 (10/03)	
		4. FEI Number 65-1123906		Applied For Not Applicable	
		5. Certificate of Status Desired		\$8.76 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIGHT, MARJORIE 2236 SOUTHWEST SECOND TERRACE CAPE CORAL, FL 33991			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			FL		
Zip Code			Zip Code		
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 the Registered Agent.					
SIGNATURE  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing That Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME	TYPE	DATE	NAME	TYPE	DATE
WRIGHT, MARJORIE	☐ Change ☒ Addition			☐ Change ☐ Addition	
2236 SOUTHWEST SECOND TERRACE					
CAPE CORAL, FL 33991					
WRIGHT, PAMELA SUE	☒ Change ☐ Addition			☐ Change ☐ Addition	
2236 SOUTHWEST SECOND TERRACE					
CAPE CORAL, FL 33991					
	☐ Change ☐ Addition			☐ Change ☐ Addition	
	☐ Change ☐ Addition			☐ Change ☐ Addition	
	☐ Change ☐ Addition			☐ Change ☐ Addition	
	☐ Change ☐ Addition			☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is 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 officer or director empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 as changed or as attached with an address, with all other the information.

Dr. Marjorie Wright, President/Owner