

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2004 8:00 am**  
**Secretary of State**

02-09-2004 90048 004 \*\*\*150.00

**DOCUMENT # P01000071044**

1. Entity Name

**MOSAIC GRAPHIC DESIGN, INC.**



Principal Place of Business

3060 MERCURY ROAD  
JACKSONVILLE FL 32207

Mailing Address

3060 MERCURY ROAD  
JACKSONVILLE FL 32207

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3731769

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FARAH, JAMES  
3060 MERCURY ROAD  
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name

JAMES FARAH, ESQ

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

3060 MERCURY ROAD Suite 101

City

JACKSONVILLE

FL

Zip Code

32207

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

*James C. Farah*

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

(NOTE: Registered Agent signature required when reinstating)

*1/21/04*

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PS ☐ Delete  
NAME FARAH, RAYAD M  
STREET ADDRESS 3060 MERCURY ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE PDS ☒ Delete  
NAME FARAH, JAMES  
STREET ADDRESS 3060 MERCURY ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D, P, S, T ☐ Change ☒ Addition  
NAME FARAH, RAYAD M  
STREET ADDRESS 3060 MERCURY ROAD  
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Ray M. Farah*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-04

Date

904-731-8989

Daytime Phone #