

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

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # P93000008274 (1)

1. Corporation Name

MERKEL SCHLEICHER GRAPHIC COMMUNICATIONS, INC.



Principal Place of Business

Mailing Address

1000 N MAGNOLIA AVE  
C  
ORLANDO FL 32803  
US

1000 N MAGNOLIA AVE  
#C  
ORLANDO FL 32803  
US

3. Date Incorporated or Qualified  
01/29/1993

3a. Date of Last Report  
02/28/1995

2. Principal Place of Business  
21 228 WEBER ST.

2a. Mailing Address  
26 228 WEBER ST.

4. FEI Number  
59-3167969

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State  
23 ORLANDO, FL

City & State  
27 ORLANDO, FL

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

Zip Country  
24 32803 25 USA

Zip Country  
29 32803 30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MERKEL, KURT  
1000 N MAGNOLIA AVE #C  
ORLANDO FL 32803

81 Name MERKEL, KURT  
82 Street Address (P.O. Box Number is Not Acceptable) 228 WEBER ST.  
83  
84 City ORLANDO FL 85 Zip Code 32803

11. Pursuant to the provisions of Sections 607.032 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME MERKEL, KURT  
STREET ADDRESS 1000 N MAGNOLIA AVE #C  
CITY-ST-ZIP ORLANDO FL ☐ DELETE

1.1 TITLE D  
1.2 NAME MERKEL, KURT  
1.3 STREET ADDRESS 228 WEBER ST.  
1.4 CITY-ST-ZIP ORLANDO, FL ☒ Change ☐ Addition

TITLE D  
NAME SCHLEICHER, KURT  
STREET ADDRESS 1000 N MAGNOLIA AVE #C  
CITY-ST-ZIP ORLANDO FL ☐ DELETE

2.1 TITLE D  
2.2 NAME SCHLEICHER, KURT  
2.3 STREET ADDRESS 228 WEBER ST.  
2.4 CITY-ST-ZIP ORLANDO, FL ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/96 407 891-0315  
Daytime Phone #

CR2E034 (12/95)