

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

DOCUMENT # **P93000020949 (2)**

1. Corporation Name

VANTAGE POINT TYPE & GRAPHICS, INC.



Principal Place of Business

Mailing Address

**4034 N. 30TH AVENUE
HOLLYWOOD FL 33020
US**

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HOLLYWOOD FL 33020
US**

3. Date Incorporated or Qualified

03/16/1993

3a. Date of Last Report

07/14/1995

4. FEI Number

65-0396811

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

**MORRIS, DONALD R
701 N.E. 16TH AVENUE
APT 28
FORT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81 Name

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

824 N.W. 30 Street

83

84 City **Wilton Manors**

FL

85 Zip Code

33311

11. Pursuant to the provisions of Sections 607.09(12) and 607.09(13), 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligation of, Section 607.0507, Florida Statutes.

SIGNATURE

Donald R. Morris

(Signature of Registered Agent required for change of agent)

5-30-96

(Date)

12. OFFICERS AND DIRECTORS

TITLE **PVST** ☐ DELETE
NAME **MORRIS, DONALD R**
STREET ADDRESS **824 NW 30TH ST**
CITY-ST-ZIP **WILTON MANORS FL**

TITLE **D** ☐ DELETE
NAME **MORRIS, DONALD**
STREET ADDRESS **824 NW 30TH ST**
CITY-ST-ZIP **WILTON MANORS FL**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntary, 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 registered or trusted agent, or I am authorized 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 addition furnished with this filing.

SIGNATURE:

Donald R. Morris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-30-96 (954) 983-2043
For Date & Phone #

CR2E034 (12/95)