SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996	DIVISION OF CO	RPORATIONS		
. Corporation reside	0037579 (8)			
GRAPHICAL IMAGES OF FLORID	A, INC.			
Principal Place of Business	Mailing Address		7	II esida i iilii fasar baiki fabia iaik iaar
201 PARK PLACE SUITE 306 ALTAMONTE SPRINGS FL 32701 US	P.O. BOX 941151 MAITLAND FL 32794-1151		3. Date Incorporated or Qualified 05/04/1993	3a. Date of Last Report 05/01/1995
Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
C in An H ato	Suite, Apt. #, etc.		59-3183002	\$8.75 Additional
Suite, Apt. #, etc.	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for a Florida Statutes	intangible tax under s. 199 032, 1 Yes - No
9. Name and Address of Curr	1 - 1	30	10. Name and Address of New Re	<u> </u>
VAN GELDER, DAVID		81 Name		
201 PARK PLACE		82 Street Addr	ess (P.O. Box Number is Not Acceptab	ole)
SUITE 306		83		
ALTAMONTE SPRINGS FL 32701		84 City		85 Z _I p Code
		1 1 1		FL T
Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent Fam familiar with, and accept the obline.	0502 and 607.1508, Florida Statutes ate of Florida Such change was au ligations of, Section 607.0505, Flori	 the above-named corporation in the corporation of the cor	oration submits this statement for the p on's board of directors. Thereby accep	the appointment as registered
Signature Typed or proted name of regularized	agert and title diappointies (NOTE	Registered Agent signature requir	ed wher reinstating) ADDITIONS/CHANGES TO OFFI	OF IS AND DIRECTORS IN 12
	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	Change Addition
TLE DCPT VAN GELDER, DAVIE		1.2 NAME		
AME VAN GELDER, DAVIE TREET ADDRESS 201 PARK PL #306		1.3 STREET ADDRESS		
ITY-ST-ZIP ALTAMONTE SPRINGS FL		1.4 CITY - ST - ZIP		Change Additio
TLE SCEO	DELETE	2 1 TITLE		Change Addition
IAME BLAINE, R. RICHARD III TREET ADDRESS 1066 TIMBERLANE RD.		2.3 STREET ADDRESS		
ITY-ST-ZIP APOPKA FL 32703		2 4 CITY - ST - ZIP		Change Addition
ITLE	DELETE	3 1 TITLE		Ti cusude Ti yanga
AME		3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS		34 CITY - ST-ZIP		
ITY-ST-ZIP	DELETE	4 1 TITLE		Change Addit-o
NAME		4 2 NAME		
STREET ADDRESS		4.3 STHEET ADDRESS		
CITY-SI-ZIP	DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		Change Addit o
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP		Change Addition
TITLE	DELETE	6 1 TITLE		L. Sharge L. Marie
NAME		6 2 NAME 6 3 STREET ADDRESS		
STREET ADDRESS		RACITY STATE		
further certify that the information indicated made under oath, that I ampan officer or di	d an this connal report or standament rector in the corporation of the rec		alify for the exemption stated in Section and accurate and that my signature st ed to execute this report as required by	n 119 07(3)(k), Florida Statutes I hall have the same legal effect as if y Chapter 617, Florida Statutes I and
SIGNATURE:	Maryldell		8/6/96	407-831-3011