FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000041107 (2)

THREAD GRAPHICS INC.

FILED Apr 15 1997 8:00am Secretary of State



		····		. 8864 #16# (148) [[] 1 8464 [148]
Principal Place of Business	Mailing Address			
1380-D N.W. 65TH AVE. PLANTATION FL 33317	1380-D N.W. 65TH AVE. Plantation FL 33313-4559	5		
			3. Date incorporated or Qualified 06/10/1993	3a. Date of Last Report 03/13/1996
Principal Place of Business	2a. Mailing Address	11.4.0	4. FEI Number	Applied For
] 1520 NW 66 AV Suite, Apt #, etc.	C 26 520 NW Suite, Apt. #, etc.	66 ATE	65-0417612	/ Not Applicab
J Suite 11	27 Svite 11	····	5. Certificate of Status Desired	Fee Required
City & State Plantation	Fl 28 Plantat	ion Fl	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Country 30 F SA	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
	s of Current Registered Agent	30 10 10 11	10, Name and Address of New Re	
JOHNSON, HENRY W		81 Name		
1401 UNIVERSITY DRIVE		00 0	CO Continue in the december	1
SUITE 301		62 Street Add	dress (P.O. Box Number is Not Acceptab	IE)
CORAL SPRINGS FL 3307	71	83		
	`	84 City		DE Zin Code
		84 City		FL 85 Zip Code
2. OF	FICERS AND DIRECTORS	: Flegistered Agent signature req.	ADDITIONS/CHANGES TO OFFIC	
TLE D	DELETE	1 1 TITLE		Change Additi
AME GELORMINE, JEAN		1.2 NAME		
REET ADDRESS 1380-D N.W. 65TH		1.3 STREET ADDRESS		
1Y-ST-ZIF PLANTATION FL 33	31/ DELETE	1.4 CITY - ST - ZIP		Change Addit
Lf .		2.1 TITLE 2.2 NAME		C outride C voqu
ME BELL ADDRESS		2.3 STREET ADDRESS		
IY-\$1-ZIP		2.4 CITY-ST-2NP	-	14
i.E	DELETE	3.1 TITLE		Change Addi
ME		3.2 NAME		
REET ADDRESS		3 3 STREET ADDRESS		,
TY-ST ZiP		3.4 CITY-ST-ZIP		
TLE .	LJ DELETE	4.1 TITLE		L. Change L Addit
AME		4. 2 NAME		
REFT ADDRESS		4.3 STREET ADDRESS		
TY - ST - ZiP	☐ DELETE	4.4 City-ST-ZiP 5.1 Title		Change Addi
AVF	-	5.2 NAME		• • •
TREET ADORESS		5.3 STREET ADDRESS		
ITY-SI-ZIP		5.4 CITY-ST-ZIP		
ſL}	☐ DELETE	61 TITLE		Change Addi
AME		6.2 NAME		
IRSE LADORESS		6.3 STREET ADDRESS		
ITY-ST-ZIP	tion supplied with this filing does not qualify	6.4 CITY - ST - ZIP	od in Costion 110 07/31/3) Florida Clabita	a. I further codify that the

1 To necesy certify that the information supplied with this timing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes, 11thref 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 BIONING OFFICER OR DIRECTOR

4/10/97

791-5480 Daylime Phone *

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