	<u>-</u>				
PROFIT CORPORATION ANNUAL REPORT  1996		FLORIDA D Sar Sc	1 IS \$225.00 PEPARTMENT OF STATE orders of State of Corporations		
DOCUI	MENT # P93	000042555	(1)		
	ESSIONAL GRAPHIC DI		` '		
FNOF	ESSIONAL GNAPHIC DI	ESIGNS, INC.		1 12 <b>4</b> (11 <b>4</b> 110 121 110 1111 121 121 121 121 121 12	)
Principal Place	of Business	Maling Address			
8201 NW 70TH ST. MIAMI FL 33166		8201 NW 70TH ST. MIAMI FL 33166			
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal Pla	age of Business	2a. Mailing Address		<b>06/16/1993 4.</b> FEI Number	05/01/1995
21	ade of Dusiness	26 Page 19 Actoress		65-0418222	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt #. etc		5. Certificate of Status Desired	\$8.75 Additional
City & State		City 8 State		6. Election Campaign Financing	Fee Required  \$5.00 May Be
Zip Country		28 Zip	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
24	25	29	30]	Florida Statutes 🖈 Yes	i □No
	9. Name and Address of C	Current Registered Agent	81 Name (	10. Name and Address of New I	Registered Agent
. DI ANCO	O, CARLOS D			CARLOS DIAZ B.	
	ROYAL POINCIANA		82 Street Ad	ddress (P.O. Box Number is Not Acceptal	ole)
SUITE 3	35		83 820	1 N.W. 70 St.	
MIAMI S	SPGS. FL 33166		84 City	Miami	85 Zip Code
11. Pursuant ti	a the provisions of Sections 607	7 0502 and 607 1508. Florida St	atutes the strove-paned corr		FL   33166
or registere familiar wit	ed agent or both in the State of	f Florida Such change was auth , Section 607.0505, Florida Stati	orzed by the corporation's butters	poration submits this statement for the pul pard of directors. Thereby accept the app	rpose of changing its registered office pointriant as registered agent. I am
SIGNATURE	Jan au	ed,	acce.	4/15	196
12.		Taperant the table Jake RS AND DIRECTORS	at I' TE. Fe ye dens I April signature resp.  13.		ENATE PROFESSIONAL CO.
TITLE	<b>d</b>	DELETE	1 1 TITLE	ADDITIONS/CHANGES TO GE	TOERS AND DIRECTORS IN 12  Ghange Addition
NAME	DIAZ, CARLOS B		1.2 NAME		
STREET ADDRESS	8201 NW 70 ST		1 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	- Delete	1.4 CHY - ST - ZIP		
TITLE NAME	SD DIAZ, OMAIDA	☐ DELETE	2 1 TIFLE 22 NAME		Change Addition
STREET ADDRESS	7168 W 17 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		2 4 CITY - ST - ZIP		
TITLE		DEL ETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4 CHY+ST+7IP 4.1 TITLE		Change Addition
NAME		_	4.2 NAME	ဝဝ္ဝဝ္ဝဝ္၁၁	36830
STREET ADDRESS			4.3 STREET ADDRESS	000001786830 -04/19/9601022003 ****208.75	
CITY-ST-ZIP		F3 DELETE	4.4.C/TY-ST-Z/P	**** <b>と</b> Uの。(3	
TITLE NAME		☐ DELETE	5 1 TITLE		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - \$1 - ZIP		
TITLE		☐ DELETE	6 1 TiTLE		☐ Change ☐ Addition
NAME			6.2 NAME		

14. If 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 ordins agricult 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 population or the renever or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Book 13 of the population of the consideration of the population of the popul

6 3 STREET ADDRESS

STREET ADDRESS

CR2E034 (12/95)