

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90092 031 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000045990

1. Corporation Name
PBE GRAPHICS WAREHOUSE, INC.



Principal Place of Business 6533 SOUTHERN BLVD. WEST PALM BEACH FL 33413	Mailing Address 6533 SOUTHERN BLVD. WEST PALM BEACH FL 33413
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/21/1993		4. FEI Number 65-0436606		Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
22 City & State	27 City & State	8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		
23 Zip Country	28 Zip Country	9. Name and Address of Current Registered Agent		
24 Zip Country	29 Zip Country	10. Name and Address of New Registered Agent		

~~HANSEN, CHARLES F JR~~ *Stevens, John D*
 6533 SOUTHERN BLVD.
 WEST PALM BEACH FL 33413

81 Name **STEVENS, JOHN D**
 82 Street Address (P.O. Box Number is Not Acceptable)
700 TEAL WAY
 83
 84 City **NORTH PALM BEACH FL** 85 Zip Code **33408**

11. Pursuant to the provisions of Sections 607.0502 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]* DATE **4/12/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVENS, JOHN D	1.2 NAME	
STREET ADDRESS	700 TEAL WAY	1.3 STREET ADDRESS	12820 March Pointe way
CITY-ST-ZIP	NORTH PALM BEACH FL	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33408
TITLE	DV <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSEN, CHARLES F JR	2.2 NAME	
STREET ADDRESS	9278 PERTH ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33467	2.4 CITY-ST-ZIP	
TITLE	DS <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSEN, JUDENE	3.2 NAME	
STREET ADDRESS	9278 PERTH ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RECD. APR 12 1999

CR2E034 (1/198)