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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000066593 (3)

1. Corporation Name

'GO GRAPHICS' GROUP INC.

ch 3449 \$165.00



Principal Place of Business

5135 CURRYFORD RD.
SUITE 100
ORLANDO FL 32812
US

Mailing Address

C/O LARRY WOOD
13212 LAKE MARY JANE RD.
ORLANDO FL 32832
US

3. Date Incorporated or Qualified
09/24/1993

3a. Date of Last Report
01/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 5135 CURRY FORD RD

Suite, Apt. #, etc.

27 STE 100

City & State

28 ORLANDO FL

Zip

29 32812

Country

30 U.S.

4. FEI Number

59-3204207

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

WOOD, LARRY

~~13212 LAKE MARY JANE RD.~~
~~ORLANDO FL 32832-6229~~

10. Name and Address of New Registered Agent

81 Name

LARRY W. WOOD

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

5135 CURRY FORD RD

83

STE. 100

84 City

ORLANDO

FL

85 Zip Code

32812

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WOOD, LARRY
STREET ADDRESS 13212 LAKE MARY JANE RD.
CITY-ST-ZIP ORLANDO FL 32832-6229

TITLE D
NAME WHITE, RICHARD
STREET ADDRESS 6522 BLACK MESA DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 13729 KIRBY SMITH RD
2.4 CITY-ST-ZIP ORLANDO FL 32832

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

Richard H. White

RICHARD H. WHITE

1/8/97 407 658 2687

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)