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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000081605 (6)

MARESMA PRINTING GROUP, INC.

FILED May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 JOSHADI (AN UNION MAIN BRIN BRIN BRIN BRIN BRIN				
70 NW 22N	D AVE	70 NW 22ND AVE				·				
MIAMI FL 3		MIAMI FL 33131				DO NOT WORK IN THE	00405			
1						DO NOT WRITE IN THI	SPACE			
						3. Date Incorporated or Qualified				
A Diasinal D	the state of Division of Divis	De Mailine Address				11/22/1993 4. FEI Number				
—	lace of Business	2a. Mailing Address						Applied For		
Suite, Apt.	# atc	Suite, Apt. #, etc.				0370403240	65-0455246 Not Applicable \$8.75 Additional			
	R, Old.		·			5. Certificate of Status Desired	,	Required		
City & State	9	City & State	City & State			6. Election Campaign Financing		 _		
23		28	er i			Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes or has paid the o				
24	25	29	30	ŕ		Personal Property Tax due June 30.		De de		
	9. Name and Address of Current Registered Agent		1421			10. Name and Address of New Registered Agent				
GUTIERREZ, ENRIQUE					Name	ne				
	0 NW 22ND AVE			82	Stron	et Address (P.O. Box Number is Not Acceptable)				
	IIAMI FL 33131			02	3000	et Address (F.O. Dox Nomber is Not Acceptable)				
•				83						
				84	City	F	L 85 Zip	o Code		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stat	utes, the al	pove	ame	ed corporation submits this statement for the purpose	of changing	its registered		
office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Familian with, and accept the obligations of, Section 607.0505, Florida Statutes.										
•										
SIGNATURE	Signature: Typed or printed name of expedeted age-	orand the if applicable (N	Olf Registere	o Age	nt signati	ture required when reinstating) DATE				
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12		
TITLE	D	DELETE	LETE 1.1 TITLE				Change	Addition		
NAME	GUTIERREZ, ENRIQUE		1.2 NAME							
STREET ADDRESS			1.3 STREET ADDRESS		ADDRESS	s				
CITY-ST-ZIP	MIAMI FL 33131			1.4 CITY-ST-ZIP						
TITLE	VP	☐ DĒLETĒ	2.1 TITLE				Change	Addition		
NAME	• · • · · • · · · · · · · · · · · · · ·		2.2 N/	2.2 NAME						
STREET ADDRESS				2.3 STREET ADDRESS		s				
CITY-ST-ZIP	HIALEAH FL				ST - 71P					
TITLE	DELETE 3		3 1 TI	3 1 TITLE			Change	Addition		
NAME	·		3.2 NAME							
STREET ADDRESS			3.3 \$1	TREET	ADDRESS	s				
CITY-ST-ZIP			3.4. C	ITY-S	1-21P					
TITLE	1	DELETE	4.1 10	TLE			Change	Addition		
NAME			4. 2 N	IAME						
STREET ADDRESS			4 3 S1	TREET	ADDRESS	ss				
CITY-ST-ZIP				17-S	I-ZIP					
TITLE		☐ DELETE	51 1	TLE			Change	Addition		
NAME			52 N	AME						
STREET ADDRESS			5351	TAEET	ADDRESS	ss		ļ		
CITY-ST-ZIP				1Y-S	1 - ZIP					
TITLE		DELETE	61 TI	TLE			☐ Change	Addition		
NAME			6.2 N/	AMF						
STREET ADDRESS			6.3 S1	TREET	ADDRESS	ss				
CITY-ST-ZIP		_,		ITY-S						
14 I hereby o	ertify that the information supplied w	ith this filing does not qualify	for the exe	empt	tion sta	ated in Section 119.07(3)(i), Florida Statutes. I further	certify that th	ne information. I		

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 changing, or on an attachment with an address.