## 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

1. Corporation	NIEN I # P93000 RY PRE-PRESS, INC.	J084446 (2)			1 00 6 140 01 140 4 70 150 1 1111 1 0 1114 <b>00</b> 144 <b>00</b> 144 <b>0</b>	DJEL MALI ODBIJ ŽIJEK DIRNA	
Principal Place	a of Business	Mailing Address				LITI HAMADAN BIRK ALAU	
2325 ULMERTON ROAD 2325 ULMERTON ROAD SUITE 17							
CLEARWATER FL 34622 CLEARWATER FL 34622-33			371				·
					3. Date Incorporated or Qualified	3a. Date of Last Re	eport
a Oissan Dissant Dissa					12/06/1993	04/25/1996	<u> </u>
		2a. Mailing Address	Mailing Address		4, FEI Number	) <del></del>	plied For
26     Suite, Apt. #, etc.     Suite, Apt. #, etc.				·····	59-3213743	60.76	t Applicable
27					5. Certificate of Status Desired	Fee Re	
City & State City & State					6. Election Campaign Financing	\$5.00	May Re
23 28						Added t	-
Zφ	Country	Zip	Countr	7	8. This corporation has liability for int	angible tax under s.	199.032,
24	25 29		30	Florida Statutes		Yes No	
	g. Name and Address of Curre	nt Registered Agent		T &/	10. Name and Address of New Regi	stered Agent	
	inedy, eric v.		81	Name			
2325 VLMERTON RD.			82	Street Add	ress (P.O. Box Number is Not Acceptable	)	
SUITE 17			100			***************************************	
CLE	ARWATER FL 34622		83				
			84	City		FL 85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the abov	e-named corp	poration submits this statement for the pur	pose of changing its	s registered
office or r agent I a	registered agent, or both, in the Stat im familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 607.0505, F	authorized b Torida Statute	y the corpora s.	poration submits this statement for the pur tion's board of directors. I hereby accept	the appointment as	registered
SIGNATURE		· · · · · · · · · · · · · · · · · · ·				**************************************	
10	Signature, typod or printed name of registered as		1E: Registered Ag	ent signature requi	(red when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE DS AND DIRECTOR	S IN 12
12.	OFFICERS AND DIRECTORS  DELETE		1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME	DUPONT, THOMAS L		1,2 NAME	i			
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-SI-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP				
TITLE	DS DELETE		2.1 TOTLE	31-21		Change	Addition
NAME	KENNEDY, ERIC		2.2 NAME	1			
STREET ADDRESS	6522 STAFFORD RD.			T ADDRESS			
City-SI-ZIP	PLANT CITY FL		2 4 City		,,,	.isk	
TITLE	DT DELETE		31 TITLE			Change	Addition
NAME	CHAPMAN, STEVEN		32 NAME	Ì			
STREET ADDRESS	2325 ULMERTON RD., SUITE	16	3.3 STREE	T ADDRESS			
CITY-ST-7/P	CLEARWATER FL		3.4. CITY	ST-ZIP			
Title		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			Ì
City - S! - ZiP	Print		4.4 CITY-	ST-ZIP		- A	1 alata
TITLE	DELETE		5.1 TITLE	[		Change	Addition
NAME			5.2 NAME				Ì
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP			5.4 CITY-	ST-ZIP		☐ Change	Addition
TILE	DELETE		6.1 TITLE	1		□ ruange	I'I WOOTOON
NAME			6.2 NAME	i			
STREET ACCRESS				T ADDRESS			İ
CITY-ST-ZIP	L,		64 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 logal 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 13 if changed 1 pr in an attachment with an address.

THOMAS L. DUPOUT

SIGNATURE:

SIGNATURE AND TYPED OR P

**FILED** 

Apr 25 1997 8:00am

Secretary of State