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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**POCUMENT #**Corporation Name P9400002291 (0)

**FILED** Apr 28 1998 8:00am Secretary of State

SOS PI	RINTING, INC.				
Principal Plac	e of Business	Mailing Address		- I OURTAUN EAS INTEL UNITE UNITE NEUTH UNTIL STIIL	DEKNU (1818 HUND KRIEN (1811 HAD)
2698 SW 87TH AVE 2698 SW 87TH AVE MIAMI FL 33165 MIAMI FL 33165				DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	<del></del>
				01/10/1994	
· .	lace of Business	2e. Mailing Address		4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. ₩, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		O Certificate of States Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	B. This corporation owes or has paid the	
24	25   26		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	ieni negisteleu Agent	81 Name	10. Name and Address of New Registers	o Agent
	NTANA, SILVIO		J. Hallie		
4926 SW 154TH CT			82 Street Address (P.O. Box Number is Not Acceptable)		
MIA	AMI FL 33185		83		
			83		
			84 City		85 Zip Code
				<u>,</u>	<b>L</b>
office or re agent. I a	egistered agent, or both, in the Sti m familiar with, and accept the ob-	ate of Florida. Such change was a ligations of, Section 607.0505, Flo	is, the above-hamed corporate withorized by the corporate rida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE					
	Signature, typed or printed name of registered	_ <del>`</del>	Registered Agent signature requi		
12.		AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
TALE	DPTS	☐ DECEIE	1.1 TITLE		Change Addition
NAME	SANTANA, SILVIO		1.2 NAME		
STREET ADDRESS	4926 SW 154TH CT		1.3 STREET ADORESS		
CITY-ST-ZIP	MIAMI FL 33185	The second	1.4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	2.1 TITLE		Change Addition
NAME	SANTANA, ROSARIO		2.2 NAME		
STREET ADDRESS	4926 SW 154TH CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33185		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			. 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		

14. I 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 supplier entire that I are an accurate and that my signature shall have the same legal effect as if made under oath; that I are an officer or director of the corporation or the receiver or trusted 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**