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Feb 05 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 # P94000010287 (8)

1. Corporation Name

MULTI-COLOR GRAPHIC PRINTING, INC.

Principal Place of Business

12126 S.W. 117 CT.
MIAMI FL 33106

Mailing Address

12126 S.W. 117 CT.
MIAMI FL 33106-5205

3. Date Incorporated or Qualified

02/08/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

2a. Mailing Address

26 Suite, Apt. #, etc

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

65-0465008

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

GRAU, JOSE
9410 S.W. 103 AVE.
MIAMI FL 33176

New Address

10. Name and Address of New Registered Agent

81 Name

JOSE GRAU

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

9930 COSTA DEL SOL BLVD.

83

84 City

MIAMI

FL

85 Zip Code

33178

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 GRAU, JOSE ☐ DELETE

NAME GRAU, JOSE
STREET ADDRESS 9410 S.W. 103 AVE.
CITY-ST-ZIP MIAMI FL 33176
NEW ADDRESS

TITLE D GRAU, MIGUEL F ☐ DELETE

NAME GRAU, MIGUEL F
STREET ADDRESS 9410 S.W. 103 AVE.
CITY-ST-ZIP MIAMI FL 33176
NEW ADDRESS

TITLE D GRAU, EDUARDO ☐ DELETE

NAME GRAU, EDUARDO
STREET ADDRESS 9410 S.W. 103 AVE.
CITY-ST-ZIP MIAMI FL 33176
NEW ADDRESS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D GRAU, JOSE ☐ Change ☐ Addition

1.2 NAME GRAU, JOSE
1.3 STREET ADDRESS 9930 COSTA DEL SOL BLVD.
1.4 CITY-ST-ZIP MIAMI, FL. 33178

2.1 TITLE D GRAU, MIGUEL F ☐ Change ☐ Addition

2.2 NAME GRAU, MIGUEL F
2.3 STREET ADDRESS 9930 COSTA DEL SOL BLVD.
2.4 CITY-ST-ZIP MIAMI, FL. 33178

3.1 TITLE D GRAU, EDUARDO ☐ Change ☐ Addition

3.2 NAME GRAU, EDUARDO
3.3 STREET ADDRESS 9930 COSTA DEL SOL BLVD.
3.4 CITY-ST-ZIP MIAMI, FL. 33178

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Miguel Grau / Director

1-28-97

(305) 254-3690

Date Daytime Phone #

CR2E034 (9/96)