## 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

DOCUMENT # P9400010287 (8)

MULTI-COLOR GRAPHIC PRINTING, INC.

## FILED May 11 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address         |   |  |   | a induitedt tin jöllt ninti antit natus natus ditt   |   |
|---|---|--|---|--|---|
| terre for foret.<br>Indiago correc                  |   | artherementarement<br>Mannyarementarement  |   | DO NOT WRITE IN T  | HIS SPACE   |
|   |   |  |   | 3. Date Incorporated or Qualified  |   |
|   |   |  |   | 02/08/1994   |   |
| Principal Place of Business     2a. Mailing Address |   |  |   | 4. FEI Number  | Applied For   |
| 21 13001  |   |  | 122ND AVE.  | 65-0465008   | Not Applicable  |
| Suite, Apl.   | #, <b>e</b> tc.   | Suite, Apt #, etc.   |   | 5. Certificate of Status Desired   | \$8.75 Additional   |
| City & State  |   | City & State   |   |  | Fee Required  |
| 23 MPAN   |   |  | FLORIDA   | 6. Election Campaign Financing Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees  |
| Zip Zip   | Country   | 7ip  | Country   | This corporation owes or has paid the  |   |
| 3518  | 6 25 U.S.A.   | 29 33186   | 30 V.S.A.   | Personal Property Tax due June 30.   | Yes No  |
|   | 9. Name and Address of Current  |  | 1001 010111   | 10. Name and Address of New Registe  |   |
| GRAU, JOSE<br>9930 COSTA DEL SOL BLVD.              |   |  | 81 Name   |  |   |
|   |   |  | 82 Street Addr  | ress (P.O. Box Number is Not Acceptable)   |   |
|   | MI FL 33178   |  | on solvida  | COS (1:0: DOX 110 HOUSE TO THE FROM THE COST TO THE CO |   |
|   |   |  | 83  |  |   |
|   |   |  | 84 City   |  | 85 Zip Code   |
|   |   |  |   |  | FL [T]  |
| office or re<br>agent. I ar<br>SIGNATURE            | egisterod agent, or both, in the State on familiar with, and accept the obligation familiar with and accept the obligation familiar with a position of the state | f Florida Such change was<br>ons of, Section 607.0505, Fl  | authorized by the corporat  | poration submits this statement for the purpo-<br>ion's board of directors. I hereby accept the  | appointment as registered   |
| 12.   | OFFICERS AND  |  | 13.   | ADDITIONS/CHANGES TO OFFICERS  |   |
| TITLE   | D   | DELETE   | 1.1 TITLE   |  | Change Addition   |
| NAME  | GRAU, JOSE  |  | 1.2 NAME  |  |   |
| STREET ADDRESS                                      | 9930 COSTA DEL SOL BLVD.  |  | 1.3 STREET ADDRESS  |  |   |
| CITY-ST-ZIP   | MIAMI FL  |  | 1.4 CITY-ST-ZIP   |  |   |
| TITLE   | Ō   | DELETE   | 2.1 TITLE   |  | Change Addition   |
| NAME  | GRAU, MIGUEL F  |  | 2.2 NAME  |  |   |
| STREET ADDRESS                                      | 9930 COSTA DEL SOL BLVD.  |  | 2.3 STREET ADDRESS  |  |   |
| CITY-ST-ZIP   | MIAMI FL  |  | 2.4 CITY - ST - ZIP   |  |   |
| TITLE   | D<br>Annu Foliagna  | ☐ DELETE   | 3.1 TITLE   |  | Change Addition   |
| NAME  | GRAU, EDUARDO   |  | 3.2 NAME  |  |   |
| STREET ADDRESS                                      | 9930 COSTA DEL SOL BLVD.  |  | 3.3 STREET ADDRESS  |  |   |
| CITY-ST-ZIP<br>TITLE                                | MIAMI FL  | DELETE   | 3.4. C(TY-ST-ZIP<br>4.1 31TLE   |  | Change Addition   |
| NAME  |   |  | 4.1 MLE<br>4.2 NAME   |  | E comité E voquitori  |
| STREET ADDRESS                                      |   |  | 4. 2 NAME<br>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 THLE  |  | Change Addition   |
| NAME  |   |  | 6.2 NAME  |  |   |
| STREET ADDRESS                                      |   |  | 6.3 STREET ADDRESS  |  |   |
| CITY-ST-ZIP   |   |  | 6.4 CITY-ST-ZIP   |  |   |
| indicated of stock 12 of                            | ertify that the information supplied with<br>on this annual report or supplemental a<br>three-corrections or the receiver<br>or Block 13 if changed, as on an attach  | this filing does not qualify function to the transfer of the state of the transfer of the tran | or the exemption stated in<br>curate and that my signature<br>execute this report as requ | Section 119.07(3)(i), Florida Statutes. I furthere shall have the same legal effect as if maduired by Chapter 607, Florida Statutes; and t   | er certify that the information<br>e under oath; that I am an<br>hat my name appears in |