2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2000 8:00 am
Secretary of State
05-02-2000 90112 020 ***150.00

DOCUMENT # P94000017020

1. Entity Name

A1A PRINTING, INC.

Principal Place of Business	Mailing Address
496 SOUTH MARKET AVE. 500 BLDG. FT PIERCE FL 34982	496 SOUTH MARKET AVE. 500 BLDG. FT PIERCE FL 34982-6642

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
A1A Printing, Inc.	A1A Printing, Inc.
Suite, Apt. #, etc.: 494 S. Market Ave.	Suite, Apt. #, etc.: 494 S. Market Ave.
City & State: Ft. Pierce, Florida	City & State: Ft. Pierce, Florida
Zip: 34982 Country: USA	Zip: 34982 Country: USA

4. FEI Number 65-0578337 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BENNETT, ANNA
496 SOUTH MARKET AVE.
500 BLDG.
FT PIERCE FL 34982

7. Name and Address of New Registered Agent

Name: Bennett, Anna

Street Address (P.O. Box Number is Not Acceptable): 494 S. Market Ave.

City: Ft. Pierce FL Zip Code: 34982

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BENNETT, ANNA 496 SOUTH MARKET AVE. 500 BLDG. FT. PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Bennett, Anna 494 S. Market Ave Ft. Pierce, FL 34982	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WEDZICHA, JOHN 496 SOUTH MARKET AVE. 500 BLDG. FT. PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President John Wedzicha 494 S. Market Ave. Ft. Pierce, FL 34982	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BENNETT, NANCY 496 SOUTH MARKET AVE. 500 BLDG. FT. PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Bennett, Nancy 494 S. Market Ave. Ft. Pierce, FL 34982	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anna R. Bennett Anna Bennett President 1-13-00 (561) 460-6677
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #