

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025893 (6)
1. Corporation Name

MBA GRAPHICS OF TAMPA, INC.

Principal Place of Business

201 KELSEY LANE
TAMPA, FL 33619

Mailing Address

P.O. BOX 5059
TAMPA, FL 33675-5059

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

LEGAL ASSETS, INC.
1401 BRICKELL AVE.
SUITE 700
MIAMI, FL 33131

81 Name

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

83

84 City

FL

85 Zip Code

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 NAME STREET ADDRESS CITY-STATE-ZIP

PSD
Mandt, Richard D.
116 Adalia Ave.
Tampa, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

VASD
Mandt, Judith
116 Adalia Ave.
Tampa, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D
Mandt, Joseph D.
2224 Longmore Cir.
Valrico, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DAS
Mandt, A.J.M.
18115 Sweet Jasmine Dr.
Tampa, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

D
Mandt, Samuel P.
4003 S. Westshore Bl 1005
Tampa, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-STATE-ZIP

71 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-STATE-ZIP

81 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-STATE-ZIP

91 TITLE 92 NAME 93 STREET ADDRESS 94 CITY-STATE-ZIP

101 TITLE 102 NAME 103 STREET ADDRESS 104 CITY-STATE-ZIP

111 TITLE 112 NAME 113 STREET ADDRESS 114 CITY-STATE-ZIP

121 TITLE 122 NAME 123 STREET ADDRESS 124 CITY-STATE-ZIP

D
Mandt, Samuel P.

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 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, with all other like empowered.

SIGNATURE: *Richard D. Mandt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A M E N D E D

APPROVED
FILED

99 JUN 29 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/04/1994

4. FEI Number

59-3243446

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax

☐

Yes

☐

No

10. Name and Address of New Registered Agent

3000002929743--6
-07/13/99--01034--012
*****61.25 *****61.25

CR2E034 (11/98)

6-21-99

813-626-9430