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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000043724 (1)**

1. Corporation Name
ROTAPRESS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
200 MAITLAND AVE SUITE 160 ALTAMONTE SPRINGS FL 32701	200 MAITLAND AVE SUITE 160 ALTAMONTE SPRINGS FL 32701-5543

3. Date Incorporated or Qualified: 06/08/1994
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business	2a. Mailing Address
21 200 Maitland Av	26 200 Maitland Ave
Suite, Apt. #, etc. 22 # 160	Suite, Apt. #, etc. 27 # 160
City & State 23 Altamonte Springs, FL	City & State 28 Altamonte Springs FL
Zip 24 32701 Country 25 USA	Zip 29 32701 Country 30 USA

4. FEI Number: 59-3252644 ☐ 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	10. Name and Address of New Registered Agent
PERNOT, XAVIER 200 MAITLAND AVE SUITE 160 ALTAMONTE SPRINGS FL 32701	81 Name: CAROLINE PERNOT 82 Street Address (P.O. Box Number is Not Acceptable): 200 Maitland Ave, #160 83 84 City: Altamonte Springs FL 85 Zip Code: 32701

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: Caroline Pabux-Pernot 6/25/97
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	☐ DELETE	1.1 TITLE	VP	☒ Change ☐ Addition
NAME	PERNOT, XAVIER		1.2 NAME	PERNOT Xavier	
STREET ADDRESS	200 MAITLAND AVENUE, SUITE 160		1.3 STREET ADDRESS	200 Maitland Av, #160	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		1.4 CITY-ST-ZIP	Altamonte Springs FL 32701	
TITLE	P	☐ DELETE	2.1 TITLE	P	☒ Change ☐ Addition
NAME	DUBUSC, CAROLINE		2.2 NAME	Pernot Caroline	
STREET ADDRESS	200 MAITLAND AVENUE, SUITE 160		2.3 STREET ADDRESS	200 Maitland Av, #160	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		2.4 CITY-ST-ZIP	Altamonte Springs FL 32701	
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-ZIP		

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****165.00 ****165.00

A. Alan
7/2/97

CR2E034 (9/96)

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 added in an attachment with an address.

SIGNATURE: Caroline Pabux Pernot 6/30/97 310-426-6664