## 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 # P94000043724 (1)

ROTAPRESS INTERNATIONAL, INC.

## FILED May 21 1998 8:00am Secretary of State

Mailing Address Principal Place of Business 200 MAITLAND AVE. 200 MAITLAND AVE. APT. #160 APT. #160 ALTAMONTE SPRINGS FL 32701 DO NOT WRITE IN THIS SPACE ALTAMONTE SPRINGS FL 32701 3. Date Incorporated or Qualified 06/08/1994 2. Principal Place of Business 2a. Mailing Address Applied For 20 International Parkunge 120 International Parkung 59-3252644 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Florida 28 Heathrow Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 24 Name and Address of New Registered Agent 81 Name PERNOT, CAROLINE 200 MAITLAND AVE., #160 82 Street Address (P.O. Box Number is Not Acceptable) **ALTAMONTE SPRINGS FL 32701** 83 84 City Zip Code 85 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) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change 1.1 TITLE TITLE PERNOT, XAVIER NAME 1.2 NAME 200 MAITLAND AVENUE, SHITE 160 STREET ADDRESS 1.3 STREET ADDRESS **ALTAMONTE SPRINGS FL 32701** CITY-ST-ZIP 14 CITY-ST-ZIP ☐ DELETE Change ☐ Addition TITLE 2.1 TITLE PERNOT, CAROLINE 2.2 NAME NAME 200 MAITLAND AVENUE, SUITE 160 STREET ADDRESS 2.3 STREET ADDRESS **ALTAMONTE SPRINGS FL 32701** CITY-ST-ZIP 2. 4 CITY-ST-7IP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TO LE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-7IP CITY-ST-ZIP TITLE DELETE 511011 Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY - ST- ZIP

14. Thereby 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 armual 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 Pin receiver of rustice 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 attachyrent with an address.

1/20/08/00/757.300