

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

FILED  
Apr 08, 1999 8:00 am  
Secretary of State

04-08-1999 90100 005 \*\*\*150.00

DOCUMENT # P94000047273

1. Corporation Name

ALL STAR PRINTING & COMPUTER CENTER, INC.

Principal Place of Business

131 TOMAHAWK DRIVE  
#15-C  
INDIAN HARBOR BEACH FL 32937

Mailing Address

131 TOMAHAWK DRIVE  
#15-C  
INDIAN HARBOR BEACH FL 32937

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/24/1994

4. FEI Number

59-3259046

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

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

James H. Richey

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

1600 Sarno Road, Suite 4

83

84 City

Melbourne

FL

85 Zip Code

32935

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

3-30-99

12. OFFICERS AND DIRECTORS

TITLE PS ☒ DELETE  
NAME BEEMAN, KAREN  
STREET ADDRESS 131 TOMAHAWK DRIVE, #15C  
CITY-ST-ZIP INDIAN HARBOR BEACH FL 32937

TITLE VT ☐ DELETE  
NAME BEEMAN, JEFFREY A.  
STREET ADDRESS 131 TOMAHAWK DRIVE, #15C  
CITY-ST-ZIP INDIAN HARBOR BEACH FL 32937

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT ☒ Change ☐ Addition  
1.2 NAME Beeman, Jeffrey A.  
1.3 STREET ADDRESS 131 Tomahawk Dr, #15C  
1.4 CITY-ST-ZIP Indian Harbour Beach FL 32937

2.1 TITLE VS ☐ Change ☒ Addition  
2.2 NAME LONGMIRE, MATTHEW Q.  
2.3 STREET ADDRESS 4555 DEANNA COURT  
2.4 CITY-ST-ZIP MERRITT ISLAND, FL 32953

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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: Jeffrey A. Beeman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-99 407-777-7320

Date

Daytime Phone #

CR2E034 (11/98)