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 # **P94000057747**1. Corporation Name

SOLAR PRINTING SERVICES, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90130 026 ***150.00



Principal Place	of Business		Mailing Address						
6996 NW 42 ST 6996 NW 42 ST									
MIAMI FL 33166 MIAMI FL 33166						DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualife		<u>-</u>	
) *** '	30		1
			T = 47 m = 447			08/02/1994	 -	Applied	4 For
	lace of Business	ر اس	2a. Mailing Address	A 1 C	- 01	4. FEI Number	}-	Applied	
	3 NW 64	<u> </u>	26 18830	Nm ,	17 CF	65-0529229			plicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	1 1	.75 Addit ee Requir	
22	<u>*</u>		27			<u> </u>		-	
City & Stat			City & State	FL		6. Election Campaign Financin	-	5.00 May	
23 MIA		C STORY	28 MIAMI			Trust Fund Contribution	<u> </u>		
Zip		untry	Zip		untry USA	8. This corporation owes the co	urrent year Intangibli ∐ Ye		No.
24 3316	25 0	<u> </u>	29 33,055	30	037	Personal Property Tax.			
	9. Name and Ad	dress of Current	Registered Agent		81 Name	10. Name and Address of Nev	v Registered Agent	-	——
DICA	DO EDANCISCO				81 Name +	FRANCISCO PI	CARD		
PICARD, FRANCISCO						dress (P.O. Box Number is Not Acce	ptable)		
6996 NW 42 ST						1830 NW 47	<u>C</u> +		
MIA	AI FL 33166				83				
					84 City		85	Zip Code	
					m	Inmi	FL	330	55
11: Pursuant	to the provisions of	Sections 607.0502	and 607.1508, Florida Sta	tutes, the a	bove-named co	rporation submits this statement for t	he purpose of chang	ing its regi	stered
office or r	egistered agent, or b m familiar with, and	oth, in the State of	f Florida, Such change wa ons of, Section 607.0505,	s authorize Florida Stat	d by the corpora tutes	ntion's board of directors. I hereby acc	cept the appointmen	t as registe	лец
ì	Will, and		FRANCI		PICARE	PRESIDENT	4-20	-99	-
SIGNATURE	Signature, typed or printed	name of registered agent a			d Agent segnature requ		DATE		
12.		OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO (OFFICERS AND DIF	ECTORS	IN 12
TITLE	P		☐ DELETE	1.1 T	ITLE			hange [Addition
NAME	PICARD, FRANK			1.2 N	IAME				
STREET ADDRESS	6996 NW 42 ST			135	TREET ADDRESS				
	MIAMI FL 33166				ITY-ST-ZIP				
CITY-ST-ZIP	1110 4111 1 1 00 100	<u> </u>	☐ DELETE					hange [Addition
			—	22 N			_		}
NAME									
STREET ADDRESS			- · -	~	TREET ADDRESS				·
CITY-ST-ZIP			☐ DELETE		DITY-ST-ZIP		rnc.	hange [Addition
TITLE			LJ DECE 1E					go _	<u>,,</u> ,
NAME				3.2 N					1
STREET ADDRESS					TREET ADDRESS				
CITY-ST-ZIP	3177				CITY-ST-ZiP			haana F	Addition
TITLE .			☐ DELETE	4.1 T			ΠC	hange [אמעוזוסח
NAME				4.2	NAME				
STREET ADORESS				4.3 S	TREET ADDRESS				
CITY-ST-ZIP		_			CITY-ST-ZIP				
TITLE			☐ DELETE	5.1 T	TILE	<u> </u>		hange [Addition
NAME				5.2 N	IAME				
STREET ADDRESS				5.3 S	TREET ADDRESS				
CITY-ST-ZIP				5.4 0	CITY-ST-ZIP				
TITLE	 		☐ DELETE	6.1 T	m.e			hange [Addition
NAME			•	6.2 N	IAME				
STREET ADDRESS				6.3 \$	TREET ADDRESS				ļ
					CITY-ST-ZIP				ľ
C/TY-ST-ZIP	1			0.4 (

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:

PICARD

4-20-99

305-477-0947

Daytime Phone #