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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # P94000058100 (6)

1. Corporation Name

ADCRAFT SIGNS & COPY CENTER INC.

Principal Place of Business

12041 NW 7TH AVE.
N. MIAMI FL 33168

Mailing Address

12041 NW 7TH AVE.
N. MIAMI FL 33168

3. Date Incorporated or Qualified
08/05/1994

3a. Date of Last Report
N/A

4. FEI Number
65-0543660

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

9. Name and Address of Current Registered Agent

EYLER, JOSEPH R
12041 NW 7TH AVE.
N. MIAMI FL 33168

10. Name and Address of New Registered Agent

81 Name

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

83 City

84 City

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 constituting)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	President ☐ Change ☒ Addition
NAME		1.2 NAME	Sandra A. Eyler
STREET ADDRESS		1.3 STREET ADDRESS	821 Washington Street
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Hollywood, Florida 33019
TITLE		2.1 TITLE	Vice President ☐ Change ☒ Addition
NAME		2.2 NAME	Joseph P. Eyler
STREET ADDRESS		2.3 STREET ADDRESS	2305 N. Ocean Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Hollywood, Florida 33109
TITLE		3.1 TITLE	Secretary ☐ Change ☒ Addition
NAME		3.2 NAME	Ingrid Eyler
STREET ADDRESS		3.3 STREET ADDRESS	2305 N. Ocean Drive
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Hollywood, Florida
TITLE		4.1 TITLE	Treasurer ☐ Change ☒ Addition
NAME		4.2 NAME	Joseph R. Eyler
STREET ADDRESS		4.3 STREET ADDRESS	821 Washington Street
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Hollywood, Florida 33019
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: *Sandra A. Eyler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-95 (305) 688-6288