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PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DEPARTMENT OF CORPORATIONS

FILED

Feb 23 1996 8:00 am

Secretary of State

DOCUMENT # P94000075534 (5)

1. Corporation Name

DIRECT LABEL, INC.



Principal Place of Business

Mailing Address

1312 APOLLO BEACH SUITE L  
APOLLO BEACH FL 33572

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APOLLO BEACH FL 33572

3. Date Incorporated or Qualified  
10/12/1994

3a. Date of Last Report  
09/08/1995

2. Principal Place of Business

2a. Mailing Address

21 1312 Apollo Beach Blvd., #G  
Suite, Apt. #, etc.

26 1312 Apollo Beach Blvd.  
Suite, Apt. #, etc.

22 Suite G  
City & State

27 Suite G  
City & State

23 Apollo Beach, Florida  
Zip

28 Apollo Beach, Florida  
Zip

24 33572 Country U.S.A.

29 33572 Country U.S.A.

4. FEI Number

59-3298783

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

MCKINZIE, DALE  
1710 7 STREET SW LOT 17  
RUSKIN FL 33570

81 Name Mark Allen

82 Street Address (P.O. Box Number is Not Acceptable)  
1710 7 Street SW Lot 17

83

84 City Ruskin

FL

85 Zip Code 33570

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 changes are 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 607.0503, Florida Statutes.

SIGNATURE Mark Allen

Signature typed or printed name of registered agent and title in parentheses

(Name of Registered Agent Signature required when reinstating)

2-19-96

DATE

12. OFFICERS AND DIRECTORS

TITLE P MCKINZIE, DALE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
1710 7TH ST. SW LOT #17  
TUSKIN FL 33570

TITLE S MCKINZIE, CHARCI ☒ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
1710 7TH ST. SW LOT #17  
TUSKIN FL 33570

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P Mark Allen ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP  
Mark Allen  
1710 7 Street SW Lot 17  
Ruskin, FL. 33570

2.1 TITLE S Steve Allen ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP  
Steve Allen  
1710 7 Street SW Lot 17  
Ruskin, FL. 33570

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-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 119.07(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: Mark Allen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-96

Date

813-641-9501

Daytime Phone

CR2E034 (12/95)