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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400077664 (8)

PREMIER PRINTING OF BRANDON, INC.

FILED

May 07 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 1943 EAST STATE ROAD 60 1943 EAST STATE ROAD 60 VALRICO FL 33594 VALRICO FL 33594 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/20/1994 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 59-3274609 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes □Ño 25 29 30 Personal Property Tax due June 30. s. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name MARION, UDELL 4159 YELLOWWOOD DRIVE Street Address (P.O. Box Number is Not Acceptable) VALRICO FL 33594 В3 Zip Code 11. Pursuant to the provisions of Soctions 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 Horida. 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 nacer of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE ☐ Change ☐ Addition TITLE 1.1 TITLE MARION, UDELL NAME 1.2 NAME 4159 YELLOWWOOD DRIVE STREET ADDRESS 1.3 STREET ADDRESS Valrico fl CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change ☐ Addition 21 DITE MARION, PETER NAME 2.2 NAME STREET ADDRESS 4159 YELLOWWOOD DRIVE 2.3 STREET ADDRESS CITY-ST-ZIP Valrico fl 2. 4 CITY - ST - ZIP TITLE DELETE Change ■ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

- Ildell Man

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