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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

D05000010617

SIGNATURE AND THE DEAR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

	MENT # P950 RAPHICS CORPORATION	00010617 (	5)	I iabriebe ind kalah aring abnu dan	! I I I II I I I I I I I I I I I I I I
Principal Plac	e of Business	Mailing Address			
4344 S.W. 73RD AVE. MIAMI FL 33155		4344 S.W. 73RD AV MIAMI FL 33155	Ε.		i aanut aanat sierit aesité éstet (féit léét lé
				3. Date Incorporated or Qualified 02/02/1995	3a. Date of Last Report
2. Principa! Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-055	Not Applicab
Crty & Stat	е	27 City & State		5. Certificate of Status Desired	Fee Required
23		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Ζιρ <b>24</b>	Country	Zip	Country	This corporation has liability for in	Added to Fees
4]	9. Name and Address of Curr	29 29 Annt	30	Florida Statutes  Yes	□No
		The state of the s	81 Name	10. Name and Address of New Ro	egistered Agent
TOMPKINS, VALERIE 11601 BISCAYNE BLVD. #301			<u>L. L.</u>	dress (P.O. Box Number is Not Acceptable	e)
	FL 33181		83 84 City		Jan 7-0-4
44 5	o the presidence of Courts and one				FL 85 Zip Code
or register	ed agent, or both, in the State of Flo	92 and 607.1508, Florida Statur erida. Such change was authori	es, the above-named corpo	ration submits this statement for the purp	ose of changing its registered office
	ed agent, or both, in the State of Fio ed agent, or both, in the State of Fio th, and accept the obligations of, Sec	02 and 607.1508, Florida Statu vrida. Such change was authori; ction 607,0505, Florida Statute:	tes, the above-named corpored by the corporation's boast.	ration submits this statement for the purp ard of directors. Thereby accept the appoi	ose of changing its registered offic intment as registered agent. I am
SIGNATURE ,	of the provisions of sections 60/30ctons 60/30ctons 60/30ctons of Floe th, and accept the obligations of, Sec Styrature, typod or printed name of registered age				
SIGNATURE ,	Stynature, typed or printed name of registered ago OFFICERS AI	on and tried applicable. (No ND DIRECTORS	DIE: Registered Agenit signature require	ad whoi nearstainigh	DATE
SIGNATURE . ILE	Styriature, typod or printed name of registered age OFFICERS AI	on and the diapphospic (No	DTE: Registered Agent signature require  13. 1 1 TITLE		DATE
SIGNATURE .  12.  11LE  AME	Stynature, typed or printed name of registered ago OFFICERS AI	on and tried applicable. (No ND DIRECTORS	13. 1 1 TITLE 1.2 NAME	ad whoi nearstainigh	DATE DERS AND DIRECTORS IN 12
SIGNATURE	OFFICERS AI PTD CAMARGO, ISAAC R 3391 W. 4TH COURT HIALEAH FL 33012	on and tried applicable. (No ND DIRECTORS	DTE: Registered Agent signature require  13. 1 1 TITLE	ad whoi nearstainigh	DATE DERS AND DIRECTORS IN 12
2.  ITLE  AME  THEFT ADDRESS  INY-ST-ZIP  TLE	OFFICERS AI PTD CAMARGO, ISAAC R 3391 W. 4TH COURT HIALEAH FL 33012 VSD	on and tried applicable. (No ND DIRECTORS	13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ad whoi nearstainigh	DATE DERS AND DIRECTORS IN 12
2.  AME  THE TADDRESS  THY - ST - ZIP  THE	OFFICERS AI PTD CAMARGO, ISAAC R 3391 W. 4TH COURT HIALEAH FL 33012 VSD TARVES, VINCENT J JR	OCARC DOE & Applicable. (NO NO DIRECTORS	13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TITLE 2 2 NAME	ad whoi nearstainigh	DATE  DERS AND DIRECTORS IN 12  Change
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2.  ITTE  AME  IMEET ADDRESS  ITY-ST-ZIP  ILE  AME  ITY-ST-ZIP  ILE  AME  ITY-ST-ZIP  ILE  ITY-ST-ZIP  ILE  ITY-ST-ZIP  ILE  ITY-ST-ZIP  ILE  ITY-ST-ZIP	OFFICERS AI PTD CAMARGO, ISAAC R 3391 W. 4TH COURT HIALEAH FL 33012 VSD TARVES, VINCENT J JR 18775 S.W. 238 STREET	OF Ark the Lappicate. (NO DIRECTORS  DELETE  DELETE	13. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-ST-ZIP	ad whoi nearstainigh	DATE  CERS AND DIRECTORS IN 12  Change Addition  Change Addition
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