FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name JIFFI PRINT, INC.

P95000022070 (3)

FILED Jan 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
206 S. MILITA		3333 APENZELL CT							
DEERFIELD E	BEACH FL 33442	LAS VEGAS NV 89129 US				DO NOT WRITE II	DO NOT WRITE IN THIS SPACE		
		00				3. Date Incorporated or Qualified	IN IT IIS SPACE		
						03/17/1995			
2. Principal Place of Business 2a. Mailing Addre			ss			4. FEI Number	. Ar	oplied For	
21		26				65-0566352		ot Applicable	
Suite, Apt. #, etc. Suite, Apt			t. #, etc.			5. Certificate of Status Desired	□ \$8.75 .	Additional aquired	
22 27						6. Election Campaign Financing		·	
23		28					\$5.00 ☐ Added		
Zip	Country	Zip Country				8. This corporation owes or has paid			
24	25	29	30			Personal Property Tax due June 3		No	
	g. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Regi	stered Agent		
	rie, robert s			81	Name				
	6 S. MILITARY TRAIL		82 Street Ad		Street Ad	ddress (P.O. Box Number is Not Acceptable)		
DE	ERFIELD BEACH FL 33442		83						
			L	84	City		85 Zip	Code	
					•		FL		
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.									
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 reinstating) DATE									
12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OFFICE		RS IN 12	
TITLE	UPT	DELETE	1.1 111	LE	1	7.00111011070111111020 7.0 07.1102	☐ Change	Addition	
NAME	IHRIE, ROBERT S		1.2 NA	ME					
STREET ADDRESS	9650 STANGE AVE		1.3 ST	REET A	ADDRESS				
CITY-ST-ZIP	LAS VEGAS NV		1,4 CIT	Y-SI	- ZIP				
TITLE	DV	DELETE	2.1 TIT	LE			Change Change	☐ Addition	
NAME	IHRIE, JEAN N		2.2 NA	ME				- 1	
STREET ADDRESS	3333 APENZELL CT		2.3 STF	REET A	ADDRESS				
CITY-ST-ZIP	LAS VEGAS NV 89129		2, 4 CI	ry-s	T-ZIP				
TITLE	DS	☐ DELETE 3.		LE	1		Change	Addition	
NAME	IHRIE, PAUL D		3.2 NA	ME	Ì				
STREET ADDRESS	3333 APENZELL CT LAS VEGAS NV 89129				ADORESS	•			
CITY-ST-ZIP	LW2 AEGW2 144 93158		3,4. CI		T-ZIP		······ [] á	Fel Allen	
TITLE		☐ DELETE	4.1 111			V DIED	Change	X Addition	
NAME			4. 2 NAME			BAKOUNI, RAED			
STREET ADDRESS			4.3 STREET /			108 SAN REMO BLVD. NORTH LAUDERDALE FL	33068		
CITY-ST-ZIP		☐ DELETE	4,4 CITY - S 5.1 TITLE		- ZIP	NORTH LAUDERDALE FL.	☐ Change	Addition	
TITLE							□ cuan∂s	- Addition	
NAME			5.2 NAME		4 DDDCCC				
STREET ADDRESS			5.3 STREE						
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CIT		-ZIP		Change	Addition	
NAME			6.1 TITLE 6.2 NAME				Ontarigo	Mainor	
STREET ADDRESS					PUUBEss				
CITY-ST-ZIP			****	6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			-		
					- 437 I				

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.

January 14, 1998

702-341-8583