SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOEDDOOD (1)

FILED Sep 16 1997 8:00am Secretary of State

	ELMEISTERS, INC.	1) 60006001)				
Principal Place	e of Business	Mailing Address			T TO DEPOS OF TOTAL COLOR COLOR	OBIN BRIBS WILL BRING SOL	PA 1848 I BIII 1881
1714 VILLAGE CT 1714 VILLAGE CT BRANDON FL 33511 BRANDON FL 33511							
						E IN THIS SPACE	
					3. Date Incorporated or Qualified		•
- na-11-10	I During	I on theme address			04/12/1995 4. FEI Number	08/12/19	
	lace of Business	2a. Mailing Address	26. Maining Address			ļi	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-3309378	\$8.7	5 Additional
22		27			5. Certificate of Status Desired		Required
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	intry	8. This corporation owes or has p		
24	25	29	30		Personal Property Tax due Jun		☐ No
	9. Name and Address of Curre	ent Registered Agent		04	10. Name and Address of New R	egistered Agent	
	TH, KERRYANN			81 Name	cerry anne to 1	\mathcal{H}	
	14 VILLAGE CT			82 Street Addr	t Address (P.O. Box Number is Not Acceptable)		
BH	IANDON FL 33511			83			
				84 City		FL 85 Z	ip Code
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, F	Florida Sta	d Agent signature requir		9/12/97	
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TITLE	P TOTAL MATERIA	DELETE	1.5 T	i		∐ Chang	
NAME	TOTH, JAMES L. 1714 VILLAGE COURT		1.2 N	1			i:
STREET ADDRESS	BRANDON FL			IREE1 ADDRESS			
CITY-ST-ZIP TITLE	VP	DELETE	1.4 C	ITY-ST-ZIP		Chan	e Addition
NAME	TOTH, KERRYANNE	_ beent	2.7 N]			
STREET ADDRESS	1714 VILLAGE COURT			TREE1 ADDRESS	:]
CITY-ST-ZIP	BRANDON FL			CITY - ST - ZIP			
TITLE		DELET e	3.1 7			☐ Chan	ge Addition
NAME		_	3.2 N				}
STREET ADDRESS			3.3 \$	TREET ADDRESS			
CITY-ST-ZIP			3.4. 0	CITY - ST - ZIP			-
TITLE		DELETE	4.1 T	TLÉ		Chang	e Addition
NAME			4.21	IAME			
STREET ADDRESS			4.3 S	TREET ADDRESS]
CITY-ST-ZIP			4.4 0	ITY - ST - ZIP			
TITLE		☐ DELETE	5.1 T	TLF		Chan	ge 🔲 Addition
NAME			5.2 N	AME			
STREET ADDRESS			5.3 S	TREET ADDRESS			
CITY-ST-ZIP		····		iTY-ST-ZIP		F-1 a.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		☐ DELETE	6.1 T			Chan	ge Addition
NAME			6.2 N				
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP			640	ITY-ST-ZIP			

14. I do 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.