

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

FILED

Apr 07 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000032107 (1)

1. Corporation Name

INNOVATIVE GRAPHIC GROUP INC.

Principal Place of Business

2750 N 29 AVE.  
HOLLYWOOD FL 33020

Mailing Address

811 S.W. 158 LANE  
SUNRISE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/25/1995

4. FEI Number

65-0582435

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 2750 N. 29 AVE.

Suite, Apt. #, etc.

22 SUITE #202

City & State

23 HOLLYWOOD, FL.

Zip

24 33020

Country

25 USA

2a. Mailing Address

26 2750 N. 29 AVE.

Suite, Apt. #, etc.

27 SUITE #202

City & State

28 HOLLYWOOD, FL.

Zip

29 33020

Country

30 USA

9. Name and Address of Current Registered Agent

PATTERSON, ANNE R  
14425 S.W. 149TH TERRACE  
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name

JUDKOWITZ, HARVEY

82 Street Address (P.O. Box Number is Not Acceptable)

14281 SW. 74 TERR.

83

84 City

MIAMI

FL

85 Zip Code

33183

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.

SIGNATURE HARVEY JUDKOWITZ

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/2/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME ZELEK, DARYL L  
STREET ADDRESS 811 S.W. 158TH LANE  
CITY-ST-ZIP SUNRISE FL 33326  
☒ DELETE

TITLE D  
NAME PATTERSON, ROBERT M  
STREET ADDRESS 14425 S.W. 149TH TERRACE  
CITY-ST-ZIP MIAMI FL 33186  
☐ DELETE

TITLE D  
NAME DISARRO, DANIEL  
STREET ADDRESS 18203 S.W. 3RD STREET  
CITY-ST-ZIP PEMBROKE PINES FL 33029  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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

SIGNATURE: ROBERT M. PATTERSON

4/2/98  
DIRECTOR

954-922-5999

CR2E034 (10/97)