

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

FILED
Jun 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000041023
1. Corporation Name

SUNCOAST GRAPHICS, INC.

Principal Place of Business
13960 N.W. 60th Avenue
Miami Lakes, FL 33014

Mailing Address
13960 N.W. 60th Avenue
Miami Lakes, FL 33014

REVISED ANNUAL REPORT

AMENDMENT

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/24/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0585526	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	☐	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	☐	
Zip	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	☐ Yes ☐ No
24	25	29	30

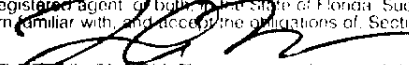
9. Name and Address of Current Registered Agent

REIGOSA, JOSE M.
13960 N.W. 60th Avenue
Miami Lakes, FL 33014

10. Name and Address of New Registered Agent

81	Name	KELLER, LAURENCE
82	Street Address (P.O. Box Number is Not Acceptable)	13960 N.W. 60th Avenue
83		
84	City	Miami Lakes
85	State	FL
86	Zip	33014

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 of 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:  LAURENCE KELLER

6/1/98

5. I declare, by print or personal name, that I am a resident of the State of Florida.

(NOTE: The registered agent's signature is required when completing this form.)

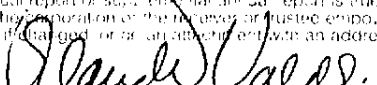
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	XXDELETE
NAME	REIGOSA, JOSE M.	
STREET ADDRESS	13960 N.W. 60th Avenue	
CITY-STATE-ZIP	Miami Lakes, FL 33014	
TITLE	VD	☐ DELETE
NAME	VALDES, ORLANDO	
STREET ADDRESS	13960 N.W. 60th Avenue	
CITY-STATE-ZIP	Miami Lakes, FL 33014	
TITLE	SD	☐ DELETE
NAME	KELLER, LAURENCE	
STREET ADDRESS	13960 N.W. 60th Avenue	
CITY-STATE-ZIP	Miami Lakes, FL 33014	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☐ Change ☐ Addition
11 TITLE	
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	P/D/T
22 NAME	VALDES, ORLANDO
23 STREET ADDRESS	13960 N.W. 60th Avenue
24 CITY-STATE-ZIP	Miami Lakes, FL 33014
31 TITLE	S/D/VP
32 NAME	KELLER, LAURENCE
33 STREET ADDRESS	13960 N.W. 60th Avenue
34 CITY-STATE-ZIP	Miami Lakes, FL 33014
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-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 supplementary 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 in an attachment with an address.

SIGNATURE:  , ORLANDO VALDES, PRESIDENT

CR2E034 (10/97)