EILE 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

P95000062491 (2) DOCUMENT #

C.M.C. LABELS & TAPES, INC.

Principal Place of Business

FILED Feb 19 1998 8:00 am Secretary of State



Mailing Address **5851 SW 25TH STREET** 5851 SW 25TH STREET HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0596138 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CABRERA, CESAR M 4251 SW 138TH COURT Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33175 83 84 City Zip Code 85 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

2-5-98 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TOTLE Change Addition CABRERA, CESAR M NAME 1.2 NAME 4251 SW 138 CT STREET ADDRESS 1.3 STREET ADDRESS Miami FL 33175 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITI F 2.1 TITLE Change Addition CABRERA, LEONOR A NAME 2.2 NAME 4251 SW 138 CT STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33175** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 200002437192 6.2 NAME -02/23/98---01004--028 STREET ADDRESS **6.3 STREET ADDRESS** ***158.75 CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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