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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P95000070081

SPOT GRAFIX, INC.

Principal Place of Business

Mailing Address

COOL OW 78TH STREET STE OR

6231 SW 78TH STREET STE 38

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90009 048 ***150.00



MIAMI FL 33143		MIAMI FL 33143			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					1 7
		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			09/12/1995
2. Principal Place of Business 2a. Mailing Addr					4. FEI Number Applied For
21		26 P.O. BOX 330078			65-0609731 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired
City & State	9 35 39 40 7	City & State	•	7 -	6. Election Campaign Financing 55.00 May Be
23		28 Wigni PC	28 Mani R		Trust Fund Contribution Added to Fees
Zip	Country		Zip Country		8. This corporation owes the current year Intangible
24	25 29 33233-001830		0	•	Personal Property Tax. Yes No
24	9. Name and Address of Curren		7		10. Name and Address of New Registered Agent
-	J. Halle and Address S. College			B1 Name	
BRIC	KER, DAVID		ļ	DA	WID BRICKER
	SW 78TH STREET STE 38			Street Ad	dress (P.O. Box Number is Not Acceptable)
		}	<i> 100</i>	1 S.W. 1345 TELLARIO	
IAITU	11 FL 33143			0-9	
			Ì	84 City /	FL 85 Zin Code
44 Purcuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the ab	2112 22 24 22	reportion submits this statement for the purpose of changing its registered
office or re	edistared agent or both in the State	of Florida, Such change was auti	norizea	by the corbora	ation's board of directors. I hereby accept the appointment as registered
agent. I ar	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	a Statu	ies.	•
SIGNATURE					ured when reinstation) DATE
·	Signature, typed or printed name of registered ager		_	igent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		ID DIRECTORS	13. 1.1 ТП		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE .	D DDIOUTE DAYE	C DELETE	i		
NAME	BRICKER, DAVID	_	1.2 NA		
STREET ADDRESS	201 011 011 011 E		1.3 STI	REET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143		1.4 CIT	Y-ST-ZIP	
TITLE		☐ DELETE	2.1 TIT	E	☐ Change ☐ Addition
NAME			2.2 NA	ME.	
STREET ADDRESS			2.3 ST	REET ADDRESS	
CITY-ST-ZIP			2. 4 CI	Y-ST-ZIP	~
TITLE		☐ DELETE	3.1 TIT		Change Addition
NAME			3.2 NA	ME	•*
\$				REET ADDRESS	
STREET ADDRESS					
CITY-ST-ZIP		□ DELETE	3.4. CI 4.1 TIT	Y-ST-ZIP	☐ Change ☐ Addition
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NAME			4. 2 N/	- I	
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CITY-ST-ZIP			4.4 CII	Y-ST-ZIP	
TITLE		☐ DELETE	5.1 TIT	1	☐ Change ☐ Addition
NAME			5.2 NA	AE	
STREET ADDRESS			5.3 ST	REET ADDRESS	~ ~°
CITY-ST-ZIP			5.4 Cf1	Y-ST-ZIP	- · · ·
TITLE		☐ DELETE	6.1 TIT	<u> </u>	☐ Change ☐ Addition
1			6.2 NA	we	N.
NAME				REET ADDRESS	
STREET ADDRESS				V CT 7ID	

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 or an attachment with an address, with all other like empowered.

SIGNATURE

REQUINZD