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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000075326 (5)

MODERN PRINTING OF SOUTH FLORIDA, INC.

Principal Place of Busines
1822 N.W. 22ND ST

Mailing Address

## **FILED** Apr 07 1997 8:00am Secretary of State



		ARRA NIME COMES OF	<b>~</b>							
1822 N.W. 22N MIAMI FL 3314		1822 N.W. 22ND ST Miami FL 33142-7444								
						3. Date Incorporated or Qualified 09/25/1995	3a. Da:	i. Date of Last Report 04/26/1996		
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	.1		Applied For	
21		26				65-0616997	Not Applicable			
Suite, Apt		Suite, Apt. #, etc.	haven			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be	
Z(p <b>24</b> ]	Country 25	Zip 29	Court	try	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for in		lax unde	r s. 199.032,	
<u></u>	9. Name and Address of Curr					10. Name and Address of New Re-		gent	,, ,	
GRA	CY, MALCOLM E		[1	B1	Name					
6201 NW 39 TERRACE VIRGINIA GARDENS FL 33166				B2	Street Addr	dress (P.O. Box Number is Not Acceptable)				
*****			֓֞֞֞֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡	63		·		····	***************************************	
			į.	84	City			85 Z	p Code	
		500 L000 E				poration submits this statement for the p tion's board of directors. I hereby accep	FL	ــلـــا		
agent. Fa SIGNATURE	Signature typisd or punited name of registered					red when reinstating)	DATE		****	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
ŤI1LE	PD	DELETE	1.1 TITU	.E				L Chang	e L. Addition	
NAME	GRACY, MALCOLM		1.2 NAA							
STREET ADDRESS	1822 N.W. 22ND ST MIAMI FL 33142		1		VODRESS .					
CITY-ST-ZIP TITLE	MIMMI FL 00142	DELETE	1.4 C(T) 2.1 T/TL		- ZIP	· · · · · · · · · · · · · · · · · · ·		Chang	e Addition	
NAME		the second second	2.2 NAA						- Land Florida	
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP			2. 4 CIT	Y-\$1	T- <b>Z</b> IP					
TITLE		DELETE	3.1 7170	.E				Chang	e 🔲 Additio	
NAME			3.2 NAM	ΜE						
STREET ADDRESS			33 STR	EET A	ADDRESS					
CITY-ST-ZIF		DELETE	3 4. CIT		r-zip				- 4400-	
TITE		☐ DELETE			ľ			∐ Chang	e L Addition	
NAME			4. 2 NA		honroe					
STREET ADDRESS I			4.3 S/R 4.4 C(T)		ADDRESS					
CITY-ST-Z:P		DELETE			- 217			Chang	e Addition	
NAME		******	5.2 NAM					_ •		
STREET ADDRESS					ADDRESS					
C(1Y-S1-Z)P			5.4 CIT		ľ					
TITLE		☐ DELETE						Chang	e Additio	
NAME			6.2 NAN	ME	İ					
STREET ADDRESS			6.3 STR	REET A	ADDRESS					
CHY-ST-ZiP			6.4 CIT	Y - 5T-	- 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.