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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

Change

\_\_\_ Addition

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000089054 (7)

THEX GRAPHICS, INC.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Principal Place of Business Mailing Address							
4778 N.W. 6TH PLACE COCONUT CREEK FL 33063		4776 N.W. 6TH PLACE COCONUT CREEK FL 33063-6743					
					3. Date Incorporated or Qualified 11/20/1995	3a. Date of La 05/01/199	•
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
21		26			65-2619277		Not Applicable
Suite, Apt. #, etc.		Suito, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & Stat	le	City & State			6. Election Campaign Financing	\$5.	00 May Be
23		28		T.	Trust Fund Contribution		ded to Fees
Zip 24	Country 25	Zip 29	Cour 30	ntry		Yes No	er s. 199.032,
	<ol><li>Name and Address of Current</li></ol>	Registered Agent			10. Name and Address of New Reg	istered Agent	
452 8UP	RPORATION CREATIONS ENTERP 1 PGA BLVD. TE 211 M BEACH GARDENS FL 33418	RISES, INC.	-	82 Street Ado	PENCE. S. JOHNSOD ress (P.O. Box Number is Not Acceptable I. N. PINE. FSI AND	RO	Zip Code
				TAMA	poration submits this statement for the p	PL I	スマスフィ
SIGNATURE	Slocence, typed or prived name of registered age	t and titlad applicable (No	)TE Registered		lion's board of directors. Thereby accep	DATE	
12.	OFFICERS AND	DELETE	13.	·.···	ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	
NAME	KAUTHEN, TIMOTHY M	L. Detter	1				ige Addition
STREET ADDRESS	% 4776 N.W. 6TH PLACE		1.2 NAI				
CITY-ST-ZIP	COCONUT CREEK FL 33063			EET ADDRESS			
TITLE	D	DELETE	1.4 CH 2.1 TrT	Y-S1-ZIP		☐ Char	nge Addition
NAME	KAUTHEN, LINDA L	ال مجددات	2 1 III				igs [_] Abdition
-STREET ADDRESS	% 4776 N.W. 6TH PLACE		1	REET ADDRESS			
CITY-ST-ZIP	COCONUT CREEK FL 33063			Y-ST-ZIP		٠.	
TITLE		DELFTE	3.1 1111	· · · · · · · · · · · · · · · · · · ·		☐ Char	nge Addition
NAME			3.2 NA1			2.3 01101	.g
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				Y- S1 - ZIP			
TITLE		DELETE				Char	ige Addition
NAME			4. 2 NA				
STREET ADDRESS				EF1 ADDRESS			
CITY-ST-ZIP				Y-\$1-7IP			
TITLE		DELETE	5.1 TH			Char	ge Addition
NAME			5.2 NA	AE			
STREET ADDRESS			53 STR	EET ADDRESS			
				1			

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 legat 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.

5.4 CITY-ST-7IP

6.3 STREET ADDRESS

61 THLE

6.2 NAME

DELETE