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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090546 (9)

1. Corporation Name

PLEXUS PREPRESS INC.

Principal Place of Business

3900 N.W. 79TH AVE.
SUITE 466
MIAMI FL 33166

Mailing Address

3900 N.W. 79TH AVE.
SUITE 466
MIAMI FL 33166

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BLVD.
SUITE 211
PALM BEACH GARDENS FL 33418

81 Name

82 Street Address (P.O. Box Number is Not Accepted)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Chapter 607, Florida Statutes, I, the undersigned, a corporate officer or registered agent, do hereby certify that the information furnished by the corporation's board of directors, and hereby accept the appointment as registered agent, I am:

SIGNATURE

[Signature]

4/4/96

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: MAESTRESS, EDDIE L
STREET ADDRESS: % 3900 N.W. 79TH AVE. SUITE 466
CITY-STATE-ZIP: MIAMI FL 33166

TITLE: [] OFFICER
NAME: [] OFFICER
STREET ADDRESS: [] OFFICER
CITY-STATE-ZIP: [] OFFICER

TITLE: [] OFFICER
NAME: [] OFFICER
STREET ADDRESS: [] OFFICER
CITY-STATE-ZIP: [] OFFICER

TITLE: [] OFFICER
NAME: [] OFFICER
STREET ADDRESS: [] OFFICER
CITY-STATE-ZIP: [] OFFICER

TITLE: [] OFFICER
NAME: [] OFFICER
STREET ADDRESS: [] OFFICER
CITY-STATE-ZIP: [] OFFICER

TITLE: [] OFFICER
NAME: [] OFFICER
STREET ADDRESS: [] OFFICER
CITY-STATE-ZIP: [] OFFICER

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME: D/P MAESTRESS, EDDIE L. [X] Change [] Addition

13.2 NAME: [] Change [] Addition

13.3 NAME: [] Change [] Addition

13.4 NAME: [] Change [] Addition

13.5 NAME: [] Change [] Addition

13.6 NAME: [] Change [] Addition

14. I do hereby certify that the information furnished by the corporation's board of directors, and hereby accept the appointment as registered agent, I am:

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/96 (305)470-0141

CR2E034 (12/95)