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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000010735 (4)

JC & L GRAPHIC GROUP, INC.

Principal Place of Business Mailing Address					
7016 SOUTHWEST 110 PLACE 7016 SOUTHWEST 1 MIAMI FL 33173 MIAMI FL 33173-2138			ACE		
				3. Date Incorporated or Qualified 02/02/1996	3a. Date of Last Report
·	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# oto	26		65-0640566	
City & State		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	9	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	No Ses No
	9. Name and Address of Curi	rent Registered Agent	1001	10. Name and Address of New Reg	
THE	LAW FIRM OF LAWRENCE J	SPIEGEL CHRTD	81 Name		
	ALMERIA AVENUE		82 Street Add	ress (P.O. Box Number is Not Acceptab	[a]
COF	RAL GABLES FL 33134			Toos (1.0. box (variable) (5 (vot / toopsido	0)
		•	83		
			84 City		■■ 85 Zip Code
			' '		
office or reagent. La	to the provisions of Sections 607.0 egistered agent, or bolh, in the Sta m familiar with, and accept the ob	i502 and 607.1508, Florida Statuti ate of Florida -Such change was a ligations of, Section 607.0505, Flo	es, the above-named cor authorized by the corpora orida Statutes.	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing its registered tithe appointment as registered
SIGNATURE	·				
	Signature, typed or printed name of registered		l. Bogistereo Agent signature requ		DATE
12.	PSTD OF MICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	LOPEZ, MARIA C	L_ DETETE	1.1 Till E		Change Addition
NAME	7016 SOUTHWEST 110 PLA	CE	1.2 NAME		
STREET ADDRESS	MIAMI FL 33173	IOL .	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	1111 1111 1 2 2 1 1 2	DELETE	1.4 C(TY - ST - ZIP 2.1 T(T)E		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-S1-7IP		
TITLE		DELETE	3.1 TITLE	The state of	Change Addition
NAME		•	3.2 NAME		-
STREET ADDRESS		0	3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		—	4.4 CHY+S1+ZIP		
TITLE		☐ DETE1E	5 1 1016		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	54 City-St-ZiP 61 Title		Change Addition
NAME			62 NAME		LI GRANGE LI ADDITION
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6 3 STREET ADDRESS		
14. I do hereb	by certify that the information supp	lied with this filing does not qualif	y for the exemption state	d in Section 119.07(3)(i), Florida Statutes	. I further certify that the
Intormatio	n indicated on this annual report of ficer or director of the comoration	ir supplemental annual report is tr or the receiver or trustee ennow	rue and accurate and tha	t my signature shall have the same legat d as required by Chapter 607, Florida St	effect as if made under eath: the
appears in	n Block 12 or Block 3 if changed,	or on an allachment with an add	lyss.		and that thy harns