2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000014029

FILED Jul 01, 2004 Secretary of State

Entity Name: SOUTH PACIFIC WHOLESALE PRINTERS, INC.

Current D-	ringinal Blass	of Business	New Prince	inal Blace of Business:	
	rincipal Place	or Business:	New Princ	ipal Place of Business:	
3000 N.E. 3 FIFTH FLO	30TH PLACE OOR				
	DERDALE, FL	333061957			
Current Ma	ailing Addres	s:	New Maili	ng Address:	
3000 N.E. 3	30TH PLACE				
FIFTH FLO FORT LAU	OR IDERDALE, FL	333061957			
FEI Number:	•	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
			•	**	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
OLLE, MAC 201 SOUTH	Y, ROBERT B CAULAY & ZOF H BISCAYNE E 33131 US	RRILLA, P.A. BLVD., SUITE 1402			
The above	named entity s	ubmits this statement for the p	urpose of changing i	ts registered office or registered agent, or bo	oth,
	of Florida.	'			
n the State	of Florida.	·			
n the State	of Florida. RE:	c Signature of Registered Age	ent	Date	_
n the State SIGNATUR n accordance	of Florida. RE: Electronice with s. 607.193	c Signature of Registered Age (2)(b), F.S., the corporation did no			_
in the State SIGNATUR In accordanc Election Carr	of Florida. RE: Electronice with s. 607.193	c Signature of Registered Age (2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notic		 ORS
in the State SIGNATUR In accordance Election Carr OFFICERS	of Florida. RE: Electronice with s. 607.193 Apaign Financing AND DIRECT	c Signature of Registered Age (2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notic	е.	 ORS
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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM WILKERSON D 07/01/2004