

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

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000017221 (8)

1. Corporation Name

MARTINI GRAPHIC SERVICES, INC.



Principal Place of Business

5205 S ORANGE AVE
208
ORLANDO FL 32809
US

Mailing Address

5205 S ORANGE AVE
208
ORLANDO FL 32835
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/26/1996

4. FEI Number

59-3364075

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 7121 Grand National Ct.

Suite, Apt. #, etc.

22 107

City & State

23 Orlando FL

Zip

24 32819

Country

25 Orange

2a. Mailing Address

26 7121 Grand National Ct.

Suite, Apt. #, etc.

27 107

City & State

28 Orlando FL

Zip

29 32819

Country

30 Orange

9. Name and Address of Current Registered Agent

POOLE, WILLIAM F IV
644 W COLONIAL DRIVE
ORLANDO FL 32804

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
STREET ADDRESS MARTINI, WILLIAM
CITY-ST-ZIP 700 BERYL PLACE
ORLANDO FL 32835

TITLE ☐ DELETE

NAME D
STREET ADDRESS MARTINI, PAMELA G
CITY-ST-ZIP 700 BERYL PLACE
ORLANDO FL 32835

TITLE ☐ DELETE

NAME D
STREET ADDRESS MARTINI, JOSEPH B
CITY-ST-ZIP 842 APPLETON AVE
ORLANDO FL 32808

TITLE ☐ DELETE

NAME D
STREET ADDRESS MARTINI, MICHELLE L
CITY-ST-ZIP 842 APPLETON AVE
ORLANDO FL 32808

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 735 Oakdale Street

1.4 CITY-ST-ZIP Windermere FL 34786

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 735 Oakdale Street

2.4 CITY-ST-ZIP Windermere FL 34786

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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

SIGNATURE

Sandra B. Mortham

4/14/98 407-208-0305

CR2E034 (10/97)