

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000024671 (5)**

1. Corporation Name
PRINTEX U.S.A., INC.



Principal Place of Business
**4800A SEA GRAPE DRIVE
LAUDERDALE BY THE SEA FL 33308
US**

Mailing Address
**4800A SEA GROVE DRIVE
LAUDERDALE BY THE SEA FL 33308
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/15/1996

4. FEI Number

65-0650759

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 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 **4600A SEA GRAPE Dr.**

27 City & State

28 **LAUD. BY THE SEA, FL**

29 **33308** 30 **US**

9. Name and Address of Current Registered Agent

**SARTONI, BRUNO
275 COMMERCIAL BLVD
STE. 260
LAUDERDALE BY THE SEA FL 33308**

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	PD	<input type="checkbox"/> DELETE
NAME	PASSA, GIOVANNI	
STREET ADDRESS	VIA ANTICOLANA 68, ANAGNI,	
CITY-ST-ZIP	FROSINONE, ITALY 03012	
TITLE	VST	<input type="checkbox"/> DELETE
NAME	GABRIELI, MAURIZIO	
STREET ADDRESS	C/O 5310 NW 33RD AVENUE STE 110	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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-07/23/98--01063--047
*****150.00**

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, 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: *[Signature]* **BRUNO SARTONI - registered agent** (697) 351-1154

CR2E034 (5/98)

4600A SEA GRAPE DRIVE
LAUDERDALE-BY-THE-SEA
FLORIDA - 33308-3524 U.S.A.

PRINTEX USA INC.

Telephone+FAX (001) 954-772.6050

JULY 06, 1998

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Attn: SANDRA B.MORTHAM

SUBJECT: PROFIT CORPORATION ANNUAL REPORT 1998

ENCLOSED CHECK FOR US\$ 150.00 AS FILING FEE FOR 1998.

DELAY IN FILING PRINTEX USA INC 1998 ANNUAL REPORT AS OF JUNE 05,
WAS DUE TO THE FACT THAT THE COMPANY HAS NOT RECEIVED THE 1ST
NOTICE BECAUSE THE MAILING ADDRESS WAS INCORRECT AS EXPLAINED
TO YOUR OFFICE IN OCCASION OF OUR CALL OF 07/06/98.

WE ARE NOW SUBMITTING THE PROFIT CORPORATION ANNUAL REPORT
DOCUMENT WITH THE CORRECT MAILING ADDRESS.

WE ARE REALLY SORRY FOR ANY INCONVENIENCE.

BEST REGARDS,