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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000040952 (9)

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INTERNATIONAL CLEAN PRINT, INC.

Principal Place of Business Mailing Address 663 SAWYER DRIVE 663 SAWYER DRIVE **CUDJOE KEY FL 33042** CUDJOE KEY FL 33042-4047 3. Date Incorporated or Qualified 3a. Date of Last Report 05/13/1996 Principal Place of Business 2a. Mailing Address FET Number Applied For **65-**066*4430* 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Bo 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes 25 29 Florida Statutes 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name TERPNER, STEEN **633 SAWYER DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) **CUDJOE KEY FL 33042** 83 84 City 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statules, 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 registers diagnost and title if applicable (NOTE: Bog stered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELF 1E TITLE Change Addition 1.1 THUE TERPNER, STEEN NAME 1.2 NAME 663 SAWYER DRIVV E STREET ADDRESS 1.3 STREET ADDRESS **CUDJOE KEY FL 33042** CITY-ST-ZIP 1.4 CITY - ST - 7IP DELETE Change Addition TITLE 2 1 TITLE NAME 2.2 NAME STREET ADDRESS 2.9 STREET ADDRESS CITY-ST-ZIF 2 4 CHY - S1 - ZIP DELETE Change ☐ Add₁tion TITLE 3.1 1016 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. C/TY - ST - 7IP DELETE Addition TITLE Change 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C!TY - ST - ZIP DELFTE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS DITY-ST-ZIP 5.4 OiTY-ST-ZIP DELETE TITLE ☐ Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CHY-ST-ZIP 14. I do hereby certify that the information supplied with this filting 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 eath; 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.