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

PROF IT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

1998

P96000070947 (2)

VITAL GRAPHICS, INC.

Apr 21 1998 8:00am Secretary of State
DO NOT WRITE IN THIS SPACE
Incorporated or Qualified

Principal Place of Business Mailing Address					ı tadısadı ile edile dilil edili edili edili edili edile edile elili elbi ilkel 1881		
1240 W 69TH ST HIALEAH FL 33014		1240 W 68TH ST HIALEAH FL 33014			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 08/26/1996		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt. #	Lato	Suite, Apt #, etc.			65-0692074 Not Applies		
22	, 010	27			5. Certificate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	X(b)	Country		8. This corporation owes or has paid the current year		
24	25 25 Name and Address of Curre	29	30		Personal Property Tax due June 30. Yes	□ No	
	 	int Registered Agent	81	Name	10. Name and Address of New Registered Agent		
GONZALEZ, LUIS E 233 w 33 st							
	ALEAH FL 33012		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
1 117	TOPOCHITE VVVIS		83				
v			84	City	1	7: 6: 3	
			84	City	FL 85	Zip Gode	
12.		ND DIRECTORS	13.	nt signature requ	uited when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIREC		
TITLE	PSD	DILFTE	1.1 1014		Char	nge 🔲 Additio	
NAME CAREER ADDRESS	GONZALEZ, LUIS E 233 W 33 ST		1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	HIALEAH FL 33012		1.3 STREET				
TITLE	VD	DELETE	1.4 GITY - ST - ZIP 2.1 THUF		Char	nge Additio	
NAME	GONZALEZ, JOSE C	_	22 NAME			igo [1 i vocino	
STREET ADDRESS	233 W 33 ST		23 S1RL[1	ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33012		2. 4 CITY - S	1 - Z IP			
TITLE	TD	DETETE	3.1 1/TLF		☐ Char	ige 🔲 Additioi	
NAME	Gonzalez, Daisy C 233 w 33 st		3.2 NAME				
STREET ADDRESS CITY-ST-ZIP	233 W 33 ST HIALEAH FL 33012		3.3 STREET				
TITLE	THALLANT I L 09012	DILEIE	3.4 CITY-S	1-718	Char	ige Addition	
NAME		*****	4. 2 NAM(-e- Lindshift	
STREET ADDRESS			43 STREET	ADDRESS			
CITY-ST-ZIP			44 CITY- ST	- Z IP			
TITLE		DELETE	51 MILE		☐ Chan	ge Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP TITLE		DILLETE	5.4 CITY - ST G.1 TITLE	- 21P	III Chan	00 Addis'	
NAME		[_] DITE 10	6.1 HILE 6.2 NAME		☐ Chan	ge Addition	
STREET ADDRESS			6.3 STREET	TOURESS			
D. RELITORICON			9.3 SIN(11)	5.7011 33			

14. Thereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.