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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P96000073940 (4)

D & L SCREEN PRINTING, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Addre	ess			. 10011221 112 10110 01111 02111 02111 02111 10111			
12511 CHICAG			12511 CHICAGO AVE						
HUDSON FL 3	34669	HUDSON FL	34869			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						09/03/1996			
2. Principal P	lace of Business	2a. Mailing Ac	Idress			4. FEI Number		Applied For	
21		26	26			59-3396354		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			6. Certificate of Status Desired		5 Additional	
22		27				6. Certificate of Status Desired	Fee	Required	
City & State	9	City & Stal	e			6. Election Campaign Financing		May Be	
23		28				Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Zip	ļ	Country	,	8. This corporation owes or has paid the c			
24	[25]	29	30	L		Personal Property Tax due June 30.	Yes	□ No	
	9. Name and Address of Co	urrent Hegistered Agen	it	81	Name	10. Name and Address of New Registered	Agent		
	rdyke, linda j			61	Name				
12511 CHICAGO AVE					Street Add	eet Address (P.O. Box Number is Not Acceptable)			
HU	DSON FL 34669			83	ļ				
				83					
				84	City		85 Z	ip Code	
					_	F I			
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Flo State of Florida, Such of	orida Statutes, Jange was euth	the above orized by	e-named co vithe coroor	progration submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing pointment	g its registered as registered	
agent. I a	m familiar with, and accept the	obligations of, Section 6	07.0505, Florid	a Statutes	B.	and the board of an obtained the organization of		· - 3 ·	
SIGNATURE								~	
	Bignature, typed or printed name of register		(NÖTE: Re		ent signature req	pulred when reinstating) DATE	ID DIDECT	ODC IN 10	
12.	D	S AND DIRECTORS	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AF	Chang		
TITLE	-	Ц	DELETE				L_J Oneng	e	
NAME	NORDYKE, LINDA J			1.2 NAME					
STREET ADDRESS	12511 CHICAGO AVE			1.3 STREET					
CITY-ST-ZIP	HUDSON FL 34669		DÉLETE	1.4 CITY - S	ST-ZIP		Chang	e	
TITLE	D D	Ц	DECETE	2.1 TITLE			L_J Criang	e	
NAME	NORDYKE, DONALD L			2.2 NAME					
STREET ADDRESS	12511 CHICAGO AVE			2.3 STREET					
CITY-ST-ZIP	HUDSON FL 34669		DELETE	2. 4 CITY-	ST - ZIP		Chan	Addition	
TITLE		Ц	DELETE	3.1 TITLE			L Chang	je Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET					
CITY-S1-ZIP			AFI FYE	3.4. CITY-	ST-ZIP			a date	
TITLE		لسا	DELETE	4.1 TITLE	- 1		L Chang	je 🗌 Addition	
NAME				4. 2 NAME]				
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	ST-ZIP				
TITLE		لـا	DELETE	5.1 TITLE			☐ Chang	je 🔲 Addition	
NAME				5.2 NAME	1				
STREET ADDRESS				5.3 STREET	ADDRESS				
CATY - ST - ZAP				5.4 CITY-S	ST-ZIP				
TITLE			DELETE	6.1 TITLE			Chang	e Addition	
NAME				62 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S	ST-ZIP				
	·					1 A 11 440 65(0)(1) 5(1) (1) A 11 1 1 1 1 1 1 1			

I hereby 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 roceiver 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: Linda J. Nordyke

3-24-98

813-862-6681