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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000080268 (1)

SOUTHEAST GRAPHICOMM, INC.

FILED Jan 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						## #### DEE!O DEE BUIDE ###
8325 N. CORAL CIR. 8325 N. CORAL CIR. NORTH LAUDERDALE FL 33068-4115 NORTH LAUDERDALE FL 33068-4115				15		
Hotel Book of the Control of the Con					DO NOT WRITE IN THIS SPACE	
					3. Date incorporated or Qualified	
B. Dringing I	Place of Pusiness	D. Maille - Astatus			09/27/1996	
2. Principal Place of Business 2a. Mailing Address 21					4. FEI Number	Applied For
21					65-0706665	Not Applicable
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	— ·	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip			Countr		Trust Fund Contribution 8. This corporation owes or has paid the	Added to Fees
24			30	-	Personal Property Tax due June 30.	Yes No
	 Name and Address of Curren 		.,, -,		10. Name and Address of New Registere	
MUSSMAN, JAY D				Name		
!		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
MIAMI LAKES FL 33014			L		cos (1.0. dox reamber is not Acceptable)	
			83			
			84	City		85 Zip Code
Durant le the symbology of Captions COT OCCO and COT 4500 Florida Oct 4500					F	
office or	registered agent, or both, in the State	of Florida, Such change was	ies, the abov authorized b	e-named corp y the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
1	am familiar with, and accept the obliga	tions of, Section 607.0505, FI	orida Statute	S.		•
SIGNATURE	Signature, typed or printed name of registered ager	and title if applicable. (NO)	TF Registered An	ent signature regult	ed when reinstating) DATE	
12.	OFFICERS AND		13.	on angriculor of requir	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1,1 TITLE	T		Change Addition
NAME	HOZA, SUSAN M		1.2 NAME			
STREET ADDRESS 8325 N. CORAL CIR.			1.3 STREET ADDRESS			
CITY-ST-ZIP NORTH LAUDERDALE FL 33068		068-4115	1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	F ADDRESS		
CITY-ST-ZIP	The state of the s		2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME ATTEM LEADERS			3.2 NAME			
STREET ADDRESS			3.3 STREET			
TITLE		DELETE	3.4. CITY - 4.1 TITLE	ST-ZIP		Change Addition
NAME			4.1 TILLE 4. 2 NAME			Change Addition
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - 5	F		
TITLE		DELETE	5.1 TITLE	,, 41		Change Addition
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY-S			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-7IP			64 CITY - S	T 7/10		

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 op an attachment with an address.