

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

FILED
Apr 14 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 # **P96000093062 (3)**

1. Corporation Name

ALL PERFECTION GRAPHICS INC.

Principal Place of Business

**12 NW 69TH AVE
MIAMI FL 33126**

Mailing Address

**12 NW 69TH AVE
MIAMI FL 33126**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Country

3. Date Incorporated or Qualified

11/08/1996

4. FEI Number

65-0710236

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

9. Name and Address of Current Registered Agent

**ROBERTO A. ESPINO JR.
555 NW 72 AVE #208
MIAMI FL 33126**

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12.	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	PT	VENTURA, JUAN M	2473 N.W. 25TH STREET	MIAMI FL 33183	<input type="checkbox"/>
	VPS	ESPINO, ROBERTO A JR	555 NW 72 AVE #208	MIAMI FL 33126	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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 employed 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, if applicable.

SIGNATURE:



4/17/98

(322) 211-1910

CR2E034 (10/97)