

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 19, 1999 8:00 am**  
**Secretary of State**

07-19-1999 90008 017 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P96000102427**

1. Corporation Name

**BIG COLOR OUTPUT, INC.**

Principal Place of Business

1327 LAFAYETTE ST  
CAPE CORAL FL 33904  
US

Mailing Address

3108 SE 11TH  
CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/18/1996**

4. FEI Number

**65-0719876**

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 the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

24

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

29

Zip

Country

30

9. Name and Address of Current Registered Agent

**DESNICK, HARVEY L**  
**~~3108 SE 11TH~~**  
**CAPE CORAL FL 33904**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**3108 SE 11th AVE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VSTD** ☐ DELETE

NAME **MARS, DALE W**

STREET ADDRESS **~~1144 SE 13TH TERR~~**

CITY-ST-ZIP **CAPE CORAL FL 33900**

TITLE **PD** ☐ DELETE

NAME **DESNICK, HARVEY L**

STREET ADDRESS **~~3108 SE 11TH~~**

CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**234 SW 43RD LANE**  
**CAPE CORAL, FL 33914**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**3108 SE 11th AVE**  
**CAPE CORAL, FL 33904**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**SECRETARY**  
**MARS, SHARON**  
**234 SW 43RD LANE**  
**CAPE CORAL, FL 33914**

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

**TREASURER**  
**DESNICK, SUCAN**  
**3108 SE 11th AVE**  
**CAPE CORAL, FL 33904**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, to an attachment with an address.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7/2/99 941-540-4441**

CR2E034 (5/99)

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# Big Color<sup>TM</sup> Output

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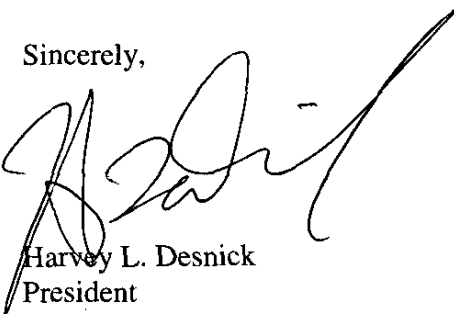
July 8, 1999

Andy N.  
DIVISION OF CORPORATIONS  
ANNUAL REPORTS FILINGS  
PO BOX 1500  
TALLAHASSEE, FL 32302-1500

Dear Andy:

Per our phone conversation of July 2, 1999 at approximately 12:39 p.m., enclosed is the BIG COLOR OUTPUT Inc. 1999 Corporation Annual Report. As per your instructions and agreement to waive the \$400.00 late filing fee, a check for \$150.00 is enclosed. To reiterate the reason for the late filing we did not receive the Annual Report first notice. You will note the address correction we have made, which could explain our not receiving the first notice. Thank you for your assistance and consideration.

Sincerely,



Harvey L. Desnick  
President  
Big Color Output