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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P970

P97000021261 (7)

HALL PRINTWORKS, INC.

Principal Place of Business

Mailing Address

FILED May 07 1998 8:00am Secretary of State



16809 ASHWOOD DRIVE TAMPA FL 33624 TAMPA FL 33624			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 03/07/1997	
-i -5 ii .	ace of Business	2a. Mailing Address 26 3417 W	Lemon	a CCI Number	
Suite, Apt.		Suite, Apt. #, etc.		\$8.75 Additional	
27				Pee Hequired	
23 Tampa, Fl 28 Tampa,			(-)	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
Zip 33609 Country 21 33609 30 H			Country 11 S b		
es Nom 2				10. Name and Address of New Registered Agent	
LOPEZ, AL R JR, ESU				PB HALL Kobert W HALL	
SUITE 500			<u> </u>	3417 W Lemon ST	
TAMPA FL 33607			83		
			84 City •	Tampa FL 85 Zip Code 37609	
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. Lam familiar with, and accept the obligations of Section 6030505, Florida statutes.					
SIGNATURE	Signature, typed or prick o name of tregetered agent as	sofution applicable (NOTE F	leg-sterod Agent signature	e required white trainstating) DATE	
12.	OFFICERS AND F		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	D	[] DELETE	1.1 TITLE	Robert W HALL	
NAME	HALL, PAULA B		1.2 NAME	16809 AShwood DR	
STREET ADDRESS	16809 ASHWOOD DRIVE		1.3 STREET ADDRESS	Tampa, F1 33624	
CITY-ST-ZIP TITLE	TAMPA FL 33624	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Paddition	
NAME		E Secure	2.2 NAME	a RHAIL ITT	
STREET ADDRESS			2.3 STREET ADDRESS	1005 Cameo CREST Lane	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Valr: (0 , F1 33594	
TITLE		DELETE	3.1 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY - ST - ZIP		
TITLE		DELETE	4 1 TITLE	☐ Change ☐ Addition	
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY+ST+ZIP		
TITLE		DELETE	51 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DEL EXE	5.4 CITY - ST - ZIP	Change Addition	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME	<i>1</i>		6.2 NAME		
STREET ADDRESS	:		6 3 STREET ADDRESS		
CITY-ST-ZIP	The three left most are a serviced with	this film sloss not qualify for	6.4 CITY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

4. I hereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or supplicmental 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 on an attachment with an address.

P Robert 12 Holl 4-28-98