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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700051600

Country

9. Name and Address of Current Registered Agent

25

1. Corporation Name

City & State

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TIPOGRAFICA DESIGN GROUP, INC.

incipal Place of Business	Mailing Address
6 NE 107TH STREET NAMI SHORES FL 33161	66 NE 107TH STREET MIAMI SHORES FL 33161
¬ ·	2a. Mailing Address
2. Principal Place of Business Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.

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DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

FILED

Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90018 018 ***150.00

06/11/1997 4. FEI Number Applied For Not Applicable 65-0775534 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution

8. This corporation owes the current year Intangible Personal Property Tax. 10. Name and Address of New Registered Agent

MCLOUGHLIN, LINDA G Street Address (P.O. Box Number is Not Acceptable) 66 NE 107TH STREET MIAMI SHORES FL 33161 83 84 City

City & State

Zip

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.

Country

30

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. VP, 5, T LINDA G. MCLoughlin ☐ Change Addition DELETE 1.1 TITLE TITLE RODRIGUEZ, JACQUELINE NAME 66 NE 107 Street 66 NE 107TH STREET 1.3 STREET ADDRESS STREET ADDRESS Main shopes, fl 33/6/ MIAMI SHORES FL 33161 1.4 CITY-ST-ZIF CITY-ST-ZIF Addition □ DELETE 2.1 TITLE Change TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITI F NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 61 TITLE ☐ Change □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

305 757 0402

CR2E034.(11/98)

Zip Code

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