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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DOCUMENT # P9700098005 (6)

S & S SCREEN PRINTING & SIGN, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business Ma		Mailing Address		
2331 N.E. 5TH AVENUE		2331 N.E. 5TH AVENUI	E	
POMPANO BEACH FL 33064		POMPANO BEACH FL 33064		DO NOT MIDITE IN THIS SOLOT
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
A Diaminut	Mana of Dunisage	1 A. Walliam Addison		11/14/1997
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number Applied For Vot Applicable
21 Suite And H sin		Suite And the sta		
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5, Certificate of Status Desired
City & State		City & State		6, Election Campaign Financing \$5.00 May Be
23	•	28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 4	25	29	30	Personal Property Tax due June 30. Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
CARVALHO, JOSE C 81 Name DE DIDEADE, MARIA 3				
1 2304 S. CYPRESS DR.			82 Strop	DE ANDRADE, MARIA 3.
APT. 215B			2	304 S. Cylress Bend DR. #215B
POMPANO BEACH FL 33069			83 Pa	MPANO Beach, Fl 33069
·			84 City	as Zin Code
			O4 City	FL S Zip Code
Ad Direct to the exemples of Continue CO7 05 02 and CO7 15 09 Elevide Classics the observe remaining a short this statement for the purpose of shorting 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.				
1 0000000001 1 00 V				
SIGNATURE	Signature typed or printe a reprode registered agent	and tide if applicable (NOT	L. Registered Agent signatu	Jie required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CARVALHO, JOSE C		1.2 NAME	
STREET ADDRESS	2304 S. CYPRESS BEND DR.	APT. 215B	1.3 STREET ADDRESS	5
CITY-ST-ZIP	POMPANO BEACH FL 33069		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 DITLE	Change Addition
NAME	DEANDRADE, MARIA J		2.2 NAME	
STREET ADDRESS	2304 S. CYPRESS BEND DR.	APT. 215B	2.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33069		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADORESS			3 3 STREET ADDRESS	;
CITY-ST-ZIP			3.4. CITY-SI - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	<u>, </u>
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	- Change Land 10001001
				,
STREET ADDRESS			6.3 STREET ADDRESS	·
CITY-ST-ZIP	certify that the information supplied with	this tiling does not qualify to	6.4 CITY - ST - ZIP	aled 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

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04/16/98

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