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 # P97000105403 (4)

DATAGRAPHIC SOLUTIONS, INC.

FILED Apr 20 1998 8:00am Secretary of State



407_328_0807

Principal Place of Business	Mailing Address		T CONTINUE TO TAKE LANGE MARKE MARKE MARKE MARKE AND AND A STATE OF THE CONTINUE OF THE CONTIN	AIAI AIIII AIAII BALAE ILLE EAE.
323 BENT WAY LANE	323 BENT WAY LANE		·	
LAKE MARY FL 82746	LAKE MARY FL 32746		DO NOT WRITE IN THE	C CDACE
			3. Date Incorporated or Qualified	3 SPACE
			12/15/1997	•
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2499 old lake mary road	<u> </u>	ake mary road	59-3483452	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 114	27 114		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Sanford , Fl	28 Sanford,	Fl	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the c	
24 32771 25 Seminole	29 32771	30 Seminole	Personal Property Tax due June 30.	Yes 🔀 No
9. Name and Address of Curre	nt Hegisterea Agent	81 Name	10. Name and Address of New Registere	J Agent
BURTON, CHARLES		OI IVALING		
323 BENT WAY LANE 82 Street Add			ress (P.O. Box Number is Not Acceptable)	
LAKE MARY FL 32746		83		
		(03)		ĺ
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.050	02 and 607 1609 Elevide State	utas the above named par		
office or registered agent, or both, in the State	e of Florida, Such change was	authorized by the corpora	tion's board of directors. I hereby accept the ap	opointment as registered
•	jations of, Section 607.0505, i	-lorida Statutes.		
SIGNATURE Signature typed or printed namin of registered ag	ent and idio il applicable (NI	OTE: Registered Agent signature requi	(ed when reinstating) DATE	
	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		Change Addition
NAME BURTON, CHARLES		1.2 NAME		
STREET ADDRESS 323 BENT WAY LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP LAKE MARY FL 32748		1.4 CITY-ST-ZIP		·
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS	•	
CITY-ST-ZIP	T SCIETE	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 TITLE	DELETE	4.4 CITY- \$1- ZIP 5.1 TITLE		Change Addition
. I	_ DECEMB	5.1 TITLE 5.2 NAME		C Olkeide C Vignition
NAME STREET ADDRESS		l l		
		5 3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	La proces	6.2 NAME		onsays normal
STREET ADDRESS		6.3 STREET ADDRESS		}
CITY-ST-ZIP		64 CITY-ST-ZIP		
14. I hereby certify that the information supplied v	vith 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 supplement. 	al annual report is true and ac	ccurate and that my signatu	re shall have the same legal effect as if made outred by Chapter 607, Florida Statutes; and that	inder cath; that I am an
Block 12 or Block 13 if changed, or on an atte		s support and report as red	ends =, enapter cor, rional diatolog, and ma	, name appears in