

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

07-08-2004 90092 021 \*\*\*150.00  
P98000043351

DOCUMENT # P98000043351

1. Entity Name  
ALL MICROGRAPHICS, INC.



Principal Place of Business

7409 BLUE SKIES DRIVE  
SPRING HILL, FL 34606

Mailing Address

7409 BLUE SKIES DRIVE  
SPRING HILL, FL 34606

FILED

04 JUL 21 PM 1:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
54060280



07012004 No Chg-P CR2E034 (10/03)

4. FEI Number  
52-1771130  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SVEHIA, DICK  
7409 BLUE SKIES DRIVE  
SPRING HILL, FL 34606

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(If not a Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SVEHIA, DICK
STREET ADDRESS	7409 BLUE SKIES DR
CITY-ST-ZIP	SPRING HILL, FL 34606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. L. Svehla (R.R. SVEHLA) 7/1/04 352.684.1195  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**ALL MICROGRAPHICS, INC.**

Dick Svehla

7409 Blue Skies Drive

Spring Hill, FL 34606

EMAIL: DSVEHLA@AOL.COM

TELEPHONE 352-684-1195 FAX 352-684-1197

To Whom It May Concern:

From: Dick Svehla

On June 30, 2004 I received a post card stating that I owe \$150 for my Corporation Annual Report.

On July 1, 2004 I immediately wrote a check for \$150 and mailed it in that same day.

On July 19, 2004 I received a letter stating that I owe a \$400. late fee. Please help, I always pay before my due dates. I did not receive notification of any post card until June 30th. Could you please waiver this \$400. late fee.

I will mark on my December calendar to pay \$150. in January of 2005.

Thank you for your help in this matter.