

PROFIT
CORPORATION
ANNUAL REPORT
1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000052607

- Corporation Name

PAPER PRINTS...ETC., INC.

Mailing Address

## FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90004 019 \*\*\*150.00



Principal Place	of Business	Mailing Address			ĺ			
6801 S.W. 49TH	+ TERRACE	6601 S.W. 49TH TERRA						
SOUTH MIAMI FL 33155-6100 SOUTH MIAMI FL 33155-6100					DO NOT WRITE IN THIS	SPACE	•	
					3. Date Incorporated or Qualifed			
				•	06/10/1998		1	
<u> </u>	The second secon				4. FEI Number	I An	olied For	
	ace of Business	2a. Mailing Address			65-08407.59	<u> </u>	t Applicable	
21 12100	) SW 105 Terrace			<del></del>	60 0010101			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<del></del>		5. Certificate of Status Desired	5. Certificate of Status Desired  \$8.75 Additional Fee Required		
22	<u></u>	27			<del></del>		<del>-</del>	
City & State		City & State						
23 MIAM		28					01883	
27 33186	Country	Zip	· —		8. This corporation owes the current year Intangible Personal Property Tax.   Yes			
24 DO 1 OV		29	30		10. Name and Address of New Registered			
	9. Name and Address of Curren	nt Registered Agent		81 Name	10. Name and Address of New Registered	regent		
DHIN	I OUDDES M			", ",				
RUDD, LOURDES M 6601 S.W. 49TH TERRACE				82 Street Address (P.O. Box Number is Not Acceptable)				
	ITH MIAMI FL 33155-6100		. }			<u></u>		
300	HE MINIMI FE 33130-0100			83				
			ŀ	84 City		85 Zip (	Code	
Į	•		- 1	1	<u>Fl</u>	<u> </u>		
11. Pursuant	to the provisions of Sections 607.050	12 and 607.1508, Florida Sta	stutes, the ab	ove-named C	orporation submits this statement for the purpose or	e changing its pintment as re	distance	
office or re	egistered agent, or both, in the State im familiar with, and accept the obliga	ations of, Section 607.0505.	Florida Statu	tes.	orporation submits this statement for the purpose or ration's board of directors. I hereby accept the appointment of the purpose of		•	
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered ege	int and title if applicable. (N		Agent signature rec	cutred when reinstating) DATE	NO DIOCOTO	00 IN 40	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		ICH ddition	
TITLE		☐ DELETE	1.1 1111	LE	Pdan sa Duald	☐ Change	E-74001UN	
NAME	·		1.2 NA	ME }	iourdes M. Rudd			
STREET ADDRESS	· .		1.3 STP	REETADORESS	66015W 49 Terrace			
CITY-ST-ZIP	, ,		1.4 CIT	Y-ST-ZP	SMIAMIL PL 83156			
TITLE		□ DELETE	21 TITL	LE	VP - Luc	Change	<b>■</b> Addition	
NAME			22 NA				_	
STREET ADDRESS		حافيتها والماسيف	ZZNA	we ~	Nicia Soeder			
· · ·	<b>\</b>	ه میدوند و د م <del>اکد</del>		REET ADDRESS	Nicia Specter 10461 SW 64 Street			
י פתי. דים יוחי	,		2.3 STR		Alicia Soccier 10461 SW 64 Street MIQMI I TL 23173			
TITS F		DELETE	23 STR 2.4 CIT	REET ADDRESS IY-ST-ZIP	Alicia Soccier 10461 SW 64 Street MIGMI 172 33173	Change	TE Addition	
TITLE		DELETE	23 STR 2.4 CIT	REET ADDRESS TY-ST-ZIP	10461 SW 64 STREET MIQMI_IT_83173			
TITLE NAME		DELETE	23 STF 2.4 CIT 3.1 TITI 3.2 NAJ	REET ADDRESS IY-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young			
NAME_ STREET ADDRESS		DELETE	23 STR 2.4 Cff 3.1 Tff 3.2 NAJ 3.3 STR	REET ADDRESS IV-ST-ZIP LE ME REET ADDRESS	10461 SW 64 STREET MIQMI_IT_83173			
TITLE NAME STREET ADORESS CITY-ST-ZIP		□ DELETE	23 STF 2.4 CT 3.1 TTT 3.2 NAJ 3.3 STF 3.4 CT	REET ADDRESS (Y-ST-ZIP LE ME REET ADDRESS (Y-ST-ZIP	10461 SW 64 Street Miami , FL 33173 Patricia Young			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			2.3 STA 2.4 CII 3.1 TIII 3.2 NAJ 3.3 STA 3.4 CII 4.1 TIII	REET ADDRESS  IV-ST-ZIP  LE  ME  REET ADDRESS  IV-ST-ZIP  LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	[12] Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			23 STR 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STR 3.4 CIT 4.1 TITI 4.2 NAI	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	[12] Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			2.3 STR 2.4 Cff 3.1 Tm 3.2 NA 3.3 STR 3.4 Cff 4.1 Tm 4.2 NA 4.3 STR	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	[12] Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.3 STR 2.4 Cff 3.1 Tm 3.2 NA 3.3 STR 3.4 Cff 4.1 Tm 4.2 NA 4.3 STR 4.4 Cff	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP V-ST-ZIP	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	DAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			23 STR 2.4 CIT 3.1 TIT 3.2 NAJ 3.3 STR 3.4 CIT 4.1 TIT 4.2 NA 4.3 STR 4.4 CIT 5.1 TITR	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	[12] Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITE 5.2 NAA	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE LE ME REET ADDRESS Y-ST-ZIP LE LE ME REET ADDRESS	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	DAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	23 STR 2.4 CIT 3.2 NAJ 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAJ 4.3 STR 4.4 CIT 5.1 TITR 5.2 NAJ 5.3 STR	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	DAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 5.2 NAA 5.3 STR 5.4 CIT 5.4 CIT 5.5 CIT 5.6 CIT 5.6 CIT 5.6 CIT 5.7 CI	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 5.2 NAA 5.3 STR 5.4 CIT 6.1 TITL 6.1 T	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	DAddition	
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 5.2 NAA 5.3 STR 5.4 CIT 5.4 CIT 5.5 CIT 5.6 CIT 5.6 CIT 5.6 CIT 5.7 CI	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 5.2 NAA 5.3 STR 5.4 CIT 6.1 TITL 6.2 NAA	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME		☐ DELETE	2.3 STR 2.4 CIT 3.2 NAA 3.3 STR 3.4 CIT 4.1 TIT 4.2 NAA 4.3 STR 5.2 NAA 5.3 STR 5.4 CIT 6.1 TITI 6.2 NAA 6.3 STR	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	10461 SW 64 Street Miami , FL 33173 Patricia Young	☐ Change	Addition	

Thereby 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 eath; 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 changes, or an attachment with an address, with all other like empowered.

SIGNATURE:

PIPED OR PRINTED NAME OF GIGHING OF CIER OR DIRECTOR
LOUIS M. RUGO, President

3/27/99

305.598.6722.

1