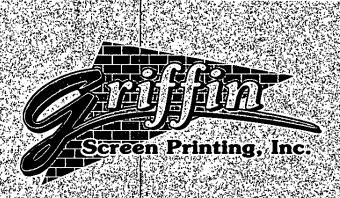
2001 UNIFORM BUSINESS REPORT (UBR)

2001	UNIFORM BUSI	FILED					
DOCUMENT # P9900081023				Aug 14, 2001 8:00 am Secretary of State			
	SCREEN PRINTING, INC.		-2001 90112 018 **				
Principal Plac	ce of Business						
3740 E 10 COURT HIALEAH FL 33013		3740 E 10 COURT HIALEAH FL 33013					
2. Principal P	Place of Business	-					
3716 Suite, Apt.	E. 10cT	3. Mailing Address 37/6 E. / Suite, Apt. #, etc.	IDET.	DC	O NOT WRITE IN THIS SP	ACE	
City & Stat	EAL T	City & State H, ACEAU FL		4. FEI Number 65	65-1948550		plied For at Applicable
33012	Country	33013	Country	5. Certificate of Statu		8.75 Add e Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
CONTENT DUDENT OF				RIFF/N /C (P.O. Box Number is Not	Acceptable)-	>-	
HIALEAH	FL 33013	37	10 E. 10	CT			
÷				EAH	FL	Zip Code	013
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. SIGNATURE							
9. This corpo	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible		Registered Agent signature requir		DATE		
Tax filing r (See criter	requirement and elects to do so.	ate Trust Fund	Impaign Financing Contribution.	Ádded	O May Be to Fees		
11.	OFFICERS AND DI	RECTORS Delete	12.	ADDITIONS/CHANG	ES TO OFFICERS AND D	RECTORS Change	Addition
NAME STREET ADORESS CITY-ST-ZIP	GRIFFIN, ROBERT SR. 3710 10 ST HIALEAH FL 33013		NAME STREET ADDRESS CITY-ST-ZIP		٠	_ Onlings	Addition
TITLE	710 122 411 2 000 10	☐ Delete	TITLE] Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE			Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP				
TITLE `NAME	L	Delete	_TITLE NAME			Change	Addition
STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS CITY-ST-ZIP	, 	·		
NAME		☐ Delete	TITLE] Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS		□ Delete	TITLE NAME STREET ADDRESS		Ε] Change	Addition
13. I hereby o	ertify that the information supplied with thi	is filing does not qualify for the	CITY-ST-ZIP ne exemption stated in S	ection 119.07(3)(i) Florida	Statutes, I further certify	that the int	formation
13. 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 11 or Block 12 if changed, or on an attachment with an address, with all provided the empowered.							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #							



Atachment Det pagoocistos BOURBS

August 7, 2001

Florida Dept. of State Div. of Corporations

To Whom It May Concern,

Re: Document no. P99000081023

I received a UBR, showing as being late... Note on this UBR form there are 3 different mailing addresses. It never received the first form. I'd really appreciate it if you would please correct this form as I have noted, so I may get this form on time in the future... I have enclosed 150:00 the standard fee; and hope you can find a way to abate the penalty I thank you I advance and await your reply. Please contact me if you have any questions at 305-691-1620.

Sincerely

Robert W. Griffin

President