FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 17 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

CITY-S1-ZIF

DOCUMENT # S29781

(9)

PAIRCHIL	U GRAFIICS INTERNATION	ML; IIVO		•				
Principal Place	of Business	, Mailing Address			\dashv		ANDIN MANDIN DARAN BINDIN D	
10926 NO. DANBURY WAY BOCA RATON FL 33498 US 1835-49 S STATE RD 7 #128 BOCA RATON FL 33498								
03		OS INTOINE GARAGE				3. Date Incorporated or Qualified 02/06/1991	3a. Date of La 08/16/199	. '
L	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
	NO . DANBURY WAY	26 9858 GCADES	CoA	2		65-0243645		Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc. 5017E 777				5. Certificate of Status Desired		75 Additional e Required
Cay & State 23 502A		City & State 28 130 CA CATON	F	<u>'</u> —		Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
^{Zip} 33 ⁴	498 25 Palm Black	29 33434 30	PACE	n Ben	19/		les □ No	ler s. 199.032,
	9. Name and Address of Current	Registered Agent	81	Name		10. Name and Address of New Re	gistered Agent	
LEIGHTON, RONA								
10926 NO. DANBURY WAY				Street A	ddress	(P.O. Box Number is Not Acceptate	ile)	
BUC	A RATON FL 33498		83					
			84	City			FL 85	Zip Code
11. Pursuant I office or re agent. La	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	and 607.1508, Florida Statutes, of Florida. Such change was auth ions of, Section 607.0505, Florid	the above norized by a Statutes	a-named c the corpo	corpora oration	ation submits this statement for the p 's board of directors. I hereby accep	urpose of changi at the appointmen	ing its registered it as registered
SIGNATURE		ALCOTE D					DATE	
12.	Signature, typed or prefet name of registreed agent OFFICERS AND		13.	ni signature re	rednirea A	when reinstating) ADDITIONS/CHANGES TO OFFICE		TORS IN 12
TITLE	P	DELETE	1.1 TITLE		P		Cha	
NAME	LEIGHTON, ERIC	-	1.2 NAME	١,	A	M LEIGHTON, RONA TO NO. DANBURY L A RATON, FL 3	.44 .	
STREET ADDRESS	222 HARMON COVE TOWERS		1.3 STREET	ADDRESS	104	TO NO. DANBURY	vary	
CITY-SI-7IP	SECAUCUS NJ		1.4 CITY-S	T-ZIP	Box	A RATON, FL 3	3498	
TITLE	VP	☐ DELETE	2.1 TITLE				Cha	inge
NAME	LEIGHTON, RONA		2.2 NAME					
STREET ADDRESS	10926 NO. DANBURY WAY		2.3 STREET	ADDRESS				
CITY-S1-7IP	BOCA RATON FL		2. 4 CITY-5	ST-ZIP				
THILE		☐ DELETE	3.1 TITLE				☐ Cha	inge Addition
NAME .			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				1
City - St - ZiP			3.4. CITY - 5	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				L Cha	ange L Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	ST-ZIP		<u> </u>	T or	nan Laddisc-
TITLE		☐ DELETE	5.1 TITLE				☐ Cha	ange [_] Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CHY-ST-ZIP		[] pricts	5.4 CITY - S	ST-ZIP			☐ Cha	ange Addition
TITLE		DELETE	6.1 TITLE			N = 1	L Gra	sign L! MUURUUR
NAME			6.2 NAME	1				
STREET ACCORESS.	I		■ 6.3 STREE1	ADDRESS				

6.4 CITY - ST - ZIP

14. I do 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 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.