FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2002 8:00 am § Secretary of State DOCUMENT # S42954 1. Entity Name 04-23-2002 90352 035 ***150.00 A-PLUS PRINTING & GRAPHIC CENTER, INC. Principal Place of Business Mailing Address 3701 NW 16TH ST 3701 NW 16TH ST SLITE A SUITE A LAUDERHILL FL 33311 LAUDERHILL FL 33311 3. Mailing Address 2. Principal Place of Business Ay Gan 12/77 GOTH razes <u>(210 1929)</u> Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 65-0253001 Not Applicable Plantation 1190787100 Country Zip \$8.75 Additional Country Zip 5. Certificate of Status Desired マルセン Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ERENS. RICHARD B Street Address (P.O. Box Number is Not Acceptable) 3701 NW 16TH STREET STE A 6561 nw 18th Court LAUDERHILL FL 33311 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Delete TITLE ☐ Change TITLE ERENS, RICHARD B. NAME NAME 3701 NW 16TH STREET STE A STREET ADDRESS rust 481 war leded STREET ADDRESS LAUDERHILL FL 33311 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP