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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **\$46430** t, Corporation Name

(2)

ED'S SCREEN PRINTING, INC.

FILED
Apr 15 1997 8:00am
Secretary of State



Principal Pia	ace of Business	Marling Address						
541 SO FLAG POMPANO BO US	GLER AVE	541 SO FLAGLER AVE POMPANO BOH FL 330 US						
					3. Date incorporated or Qualified 04/19/1991		e of Last R 0/1996	leport
2. Principal	Place of Business	2a. Mailing Address	***************************************	•	4. FEI Number	_ 	Ar	oplied For
21		26			65-0262356		No	ot Appticable
Suite, Ap 22		Suite, Apt #, etc.			5. Certificate of Status Desired		T	Additional equired
City & Sta 23	arte:	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zipi	Country	Zip	Coun	try	8. This corporation has liability for			. 199.032,
24	25	29	30		Florida Statutes -L 10. Name and Address of New Re	Yes 🗓		
	9, Name and Address of Curre	ent Hegisterec Agent		31 Name	10. Name and Address of New Re	Biareleti V	gent	
	iompson, Edward C. 7 South Flager Ave.		L					
	MPANO BEACH FL 33060			Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
			Ţ	33				
			ļ.	34 City			85 Zip	Code
					rporation submits this statement for the p	FL		
		agent and title if applicable ((NOTE: Registered	Apent signature reg	uired when reinstating)	DATE		
12				Apent signature req	uired when reinstating) ADDITIONS/CHANGES TO DEFICE		DIRECTOR	RS IN 12
12. Tillf	OFFICERS A	agent and file if applicable (IND DIRECTORS DELETE	(NOTE: Registered		uired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR Change	
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Texture the state of the component of supplied with this image does not quality 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 orrector 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, on an attachment with an address.

SIGNATURE:

Davime Phone #

0143700