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

**PROFIT** CORPORATION ANNUAL REPORT

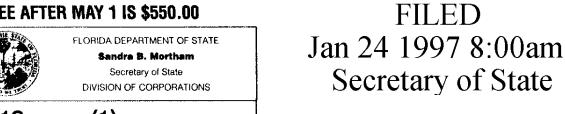
1997



## DOCUMENT # S78718

(1)

GENCO PRESS, INC.



		······································							
Principal Place of Business Mailing Address						010(1 110(1 V)	))) <b>4)4)) (4)</b>	)(1 B1B1)   <b>(</b>	
23123 ST RD	7	23123 ST RD 7							
105   Boca Raton	Fi 33438	105 BOCA RATON FL 3342	R-5407						
US	16 30-20	US	W 0101			3. Date Incorporated or Qualified	3a. Dat	e of Last	Report
						09/05/1991	02/2	9/1996	<b>,</b>
	lace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				NOT APPLICABLE			Vot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional
22		27				5. Cermicate of Status Desired		Fee F	Required
City & State	е	City & State				6. Election Campaign Financing	_		May Be
23		28				Trust Fund Contribution	Ц	<del></del>	d to Fees
Zip	Country	Zip	₩	ıntry	1	8. This corporation has liability for			s. 199.032,
24	25   9. Name and Address of Currer	29	30]			Florida Statutes  10. Name and Address of New Re	Yes _		***
		nt Hegistered Agent		81	Name	10. Name and Address of New Ne	Aistelen W	gent	<del></del>
	SSINA, JOHN				1401116				
	114 BUSHING ST			82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
ВО	CA RATON FL 33428			83					<u> </u>
•				63					
				84	City	· · · · · · · · · · · · · · · · · · ·		85 Zip	o Code
				乚	<u> </u>		<u>FL</u>	<u> </u>	<del></del>
office or r	registered agent or both in the State	e of Florida. Such change w	as authorize	d h	the coroora	poration submits this statement for the pation's board of directors. I hereby acce	ot the appo	inanging intment a	its registered as registered
agent I a	am familiar with, and accept the oblig	jations of, Section 607.0505,	, Florida Sta	tute	Š.				
SIGNATURE									
	Signature, typed or printed name of registered ag			d Age	ent signature requ	ired when reinstating)	DATE	0.05076	200 111 40
12.	OFFICERS AN	DELETE	<b>13.</b>	ITI E		ADDITIONS/CHANGES TO OFFIC		Change	
	MESSINA, DOROTHY	otten					,	- Cinnigo	- La riddillon
NAME	23123 STATE RD 7 S105		1.2 N						
STREET ADORESS	BOCA RATON FL				ADDRESS				
CITY-ST-ZIP	VP	DELETE			ST-ZIP		<del></del>	Change	Addition
TITLE			2.1 1				. '	Ulkilige	, LJ Addition
NAME	MESSINA, JOHN 23123 STATE RD 7 S105		2.2 N						
STREET ADDRESS	1				ADDRESS				
CITY-ST-ZIP	BOCA RATON FL	Doriette			ST-ZIP			Channa	Addition
THILE		☐ DELETE	3.1 T					Change	Addition
NAME			3.2 N						
STREET ADDRESS			*		r address				
CITY-ST-ZIP		DOLEN			ST-ZIP	· · · · · · · · · · · · · · · · · · ·		1 05	
TITLE		☐ DELETE	4.1 T					Change	Addition
NAME				VAME	1				
STREET AODRESS					T ADDRESS				
CITY-ST-7IP		[F]			ST-ZIP			10:	4.239
TITLE	1 ·	☐ DELETE	511				ļ	Change	e Addition
NAME	ŧ.			IAME	- 1				
STREET ADDRESS	†		5.3 S	TREE	T ADDRESS				
CITY-ST-ZIP		·····	5.4 0	ITY-S	ST-ZIP				
TITLE		☐ DELETE	6.17	ITLE			ļ	Change	e 🔲 Addition
NAME	Į.		6.2 N	IAME					
STREET ADDRESS			6.3 \$	TREET	T ADDRESS				
CITY - ST - ZIP			6.4 0	ITY-S	ST-ZIP				
<b>14.</b> I do here	by certify that the information supplic	ed with this filing does not q	ualify for the	exe	emption state	ed in Section 119.07(3)(i), Florida Statute	s. I further	certify the	at 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. Porthy Messina 1-17-97