FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 MAR -6 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V01722 (0)

1. Corporation Name
PREMIER PRINTING PLATE CORP.

Principal Place of Business	Mailing Address
3461 PARKWAY CENTER COURT ORLANDO FL 32808	3461 PARKWAY CENTER COURT ORLANDO FL 32808

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/19/1991
3a. Date of Last Report: 07/12/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 59-3097206 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22) (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State (23) (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SPERING, ROBERT J.
3461 PARKWAY CENTER COURT
ORLANDO FL 32808

10. Name and Address of New Registered Agent

81 Name: CHRISTINE M. DESANZO
82 Street Address (P.O. Box Number is Not Acceptable): 3461 PARKWAY CENTER COURT
83
84 City: ORLANDO FL 85 Zip Code: 32808

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Christine M. Desanzo CHRISTINE M. DESANZO DVPT 2/27/95
(Signature of new registered agent) (Name of new registered agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DVP	11 TITLE		☐ Change ☐ Addition
NAME	SPERING, ROBERT J	12 NAME		
STREET ADDRESS	29207 W OLD MILL	13 STREET ADDRESS		
CITY-ST-ZIP	TAVARES FL	14 CITY-ST-ZIP		
TITLE	DVPT	21 TITLE	DVPT	☒ Change ☐ Addition
NAME	DESANZO, CHRISTINE M	22 NAME	DESANZO, CHRISTINE M.	
STREET ADDRESS	6818 WELLINGTON DR	23 STREET ADDRESS	652 STONEFIELD LOOP	
CITY-ST-ZIP	NAPLES FL	24 CITY-ST-ZIP	HEATHROW, FL 32746	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this report is 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 above, or on an attached sheet, with any address.

SIGNATURE: Christine M. Desanzo Christine M. Desanzo 2/27/95 407-294-0505
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER

0088408 CP