## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

V10606 DOCUMENT #

1. Corporation Name

(4)

SPEEDKING PRINTING CENTER, INC.

Principal Place of Business Mailing Address 3376 W HILLSBORO BLVD 3376 W HILLSBORO BLVD

DEERFIELD BEACH FL 33442		DEERFIELD BEACH FL 33442							
						3. Date Incorporated or Qualified 01/29/1992	3a. Date of L 05/11		
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	•		Applied For
21		26				<b>65-0311275</b> Not Applicable			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing		\$5.0	May Be
23		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Ζφ	Cour	ntry		8. This corporation has liability for in		ider s	199.032,
24	25	29	30		· · · · · · · · · · · · · · · · · · ·	Florida Statutes Yes			
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Ro	egistered Age	nt	
				61	Name				
MANIAR,					Street Addre	t Address (P.O. Box Number is Not Acceptable)			
	OYAL PALM BLVD SPRINGS FL 33065		83			CAM DAME STATE OF STA			
CURAL S	Drainus PL 33003								
				84	City		FL	5 Z	ip Code
or registere familiar with SIGNATURE	o the provisions of Sections 607,0502, ad agent, or both, in the State of Florid h, and accept the obligations of, Section Section 1, per or protection of registered agent in Section 1, per or protection of registered agent in the section in	a. Such change was authorize on 607.0505, Florida Statutes.	d by the o	юпря	named corpora cration's board	tion submits this statement for the purp d of directors. I hereby accept the appo	oose of changing introduced as regional contess.	stere	d agent. I am
12.	OFFICERS AND		■ 13.	Alph.	1 Signature requires.	ADDITIONS/CHANGES TO OFFI		ECTO	DRS IN 12
TITLE	D	DELETE	1 1 10	1LE				hange	☐ Addition
NAME	PATEL, KALPESH M		1.2 NA	ME					
STREET ADDRESS	3449 PALLADIAN CIRCLE		1.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 C)T	TY-S	ST-ZIP				
TITLE	D	☐ DELETE	2. 1 11	TLE	MANUAL STATE OF THE STATE OF TH			hange	Addition
NAME	Patel, Kalpna K		2.2 NA	ME					
STREET ADDRESS	3449 PALLADIAN CIRCLE		2.3 ST	REET	ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		2.4 CI	IY-S	ST-ZIP				
TITLE		☐ DELETE	3 1 II	TLE			□ c	hange	☐ Addition
NAME			3 2 NA	ME					
STREET ADDRESS			•		T ADDRESS				
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TITLE		☐ DELEJE	4. 1 Ti				П	папуе	L'I vocition
NAME			4.2 NA		10000100				
STREET ADDRESS					ADDRESS				
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		C) better	5 2 NA					.igiigo	LJ radiion
NAME expert approved					T ADDRESS				
STREET ADDRESS					ST-ZIP				
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1					ST-ZIP				
CITY-ST-ZIP		TAKA1 1/2 1 (MAY 1/2 - 1/2 1/2 - 1/2	0.4 (1	11-3	01-41r				

14. I do hereby cortify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: \_\_

SIGNATURE AND TYPEFOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-428-0201 Dayting Phone #