

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90174 004 \*\*\*150.00

DOCUMENT # **V 26771**

1. Entity Name

**PORT PRINTING CO INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**3532 BROADWAY**

3. Mailing Address

**PO BOX 10861**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**647098**

City & State

**RIVIERA BEACH FL**

City & State

**RIVIERA BEACH FL**

4. FEI Number

**65-0320847**

Applied For

Not Applicable

Zip

**33404**

Country

**USA**

Zip

**33419**

Country

**USA**

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

**ERNEST GARVEY**

Street Address (P.O. Box Number is Not Acceptable)

**3532 BROADWAY**

City

**RIVIERA BEACH**

**FL**

Zip Code

**33404**

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

*Ernest Garvey*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

**4/22/02**

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

11.

OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PR  
GARVEY, ERNEST  
3532 BROADWAY  
RIVIERA BEACH FL 33404**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VP  
STUDSTILL, JOSIE  
1229 W. 25TH STREET  
RIVIERA BEACH FL 33404**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SEC  
GARVEY, VICTORINE  
129 ELYSIUM DRIVE  
ROYAL PALM BEACH FL 33411**

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Ernest Garvey* (**ERNEST GARVEY**)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/22/02 561 848 1402.**

Daytime Phone #

CR2E034B (12/01)