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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 14 PM 9:05

DOCUMENT # V31623 (4)

1. Corporation Name
GRAPHIC IMPRESSIONS OF SOUTH FLORIDA, INC.

Principal Place of Business	Mailing Address
4801 ROYAL PALM BEACH BLVD. ~~SUITE G~~ ROYAL PALM BEACH FL 33411-9188 US	4801 ROYAL PALM BEACH BLVD. ~~SUITE G~~ ROYAL PALM BEACH FL 33411-9188 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/27/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 932 B N. Dixie Hwy.
22: Suite, Apt. #, etc.
23: City & State: LAKE WORTH, FL
24: Zip: 33460 Country: 25: USA

2a. Mailing Address
26: 932 B N. Dixie HWY
27: Suite, Apt. #, etc.
28: City & State: LAKE WORTH FL.
29: Zip: 33460 Country: 30: US

4. FEI Number: 65-0329888 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ZENCZAK, WALTER
4801 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent

B1 Name: WALTER ZENCZAK III
B2 Street Address (P.O. Box Number is Not Acceptable): ~~6232 FOREST HILL BLVD~~ 932 B N. Dixie HWY
B3:
B4 City: LAKE WORTH FL B5 Zip Code: 33460

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: WALTER ZENCZAK III President — 5/22/95 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	VD	☒ Change ☐ Addition
NAME	ZENCZAK, WALTER	12 NAME		
STREET ADDRESS	4801 ROYAL PALM BEACH BLVD.	13 STREET ADDRESS		
CITY ST ZIP	ROYAL PALM BEACH FL	14 CITY ST ZIP		
TITLE	VD	21 TITLE	D	☒ Change ☐ Addition
NAME	ZENCZAK, DONNA M	22 NAME		
STREET ADDRESS	4801 ROYAL PALM BEACH BLVD.	23 STREET ADDRESS		
CITY ST ZIP	ROYAL PALM BEACH FL	24 CITY ST ZIP		
TITLE	D	31 TITLE	PD	☒ Change ☐ Addition
NAME	ZENCZAK, WALTER I	32 NAME	WALTER ZENCZAK III	
STREET ADDRESS	4801 ROYAL PALM BEACH BLVD.	33 STREET ADDRESS	6232 FOREST HILL BLVD. #202	
CITY ST ZIP	ROYAL PALM BEACH FL	34 CITY ST ZIP	West Palm Bch. FL 33415	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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: WALTER ZENCZAK III — 5/22/95 — 407-547-6474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0251445 CP