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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V46341

(6)

PRINT COMMUNICATIONS, INC.

Principal Plac	ce of Business	Mailing Address				T CORTI DILANG RULIS BAIDO HAM BLODA HAN ANOM ALDIA BARN SIRVI SIRVI ANDII ANDII 1001			
5541 ROOSEVELT BLVD CLEARWATER FL 34620		5541 ROOSEVELT BLVD CLEARWATER FL 34620-3425							
US		US				3. Date Incorporated or Qualified 06/26/1992	3a. Date	of Last ! /1996	Report
	Place of Business	2a. Mailing Address				4. FEI Number		—	pplied For
21		26				59-3135480 Not Applica			ot Applicable
Suite, Apt	, #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & Sta	te	City & State				6. Election Campaign Financing	\$5.00 May Be Added to Fees		
23 Z/p	Country Zip		Col	intry		Trust Fund Contribution	<u> </u>		
24	25	29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
27	g. Name and Address of Current		1301			10. Name and Address of New Reg			
RO	USE, ELIZABETH S			81	Name				
5541 ROOSEVELT BLVD				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
CH	EARWATER FL 34620		83						
				84	City		P:	85 Zip	Code
de Discourse	to the providing of Cooling CO7 or or	Lord 607 4500 Florido Statut	th			poration submits this statement for the pr	FL	hansina	ita ramiatara d
office or agent 1	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a itions of, Section 607.0505, Flo	authorize orida Sta	d by tutes	the corpora	tion's board of directors. I hereby accep	the appoi	itment a	s registered
SIGNATURE	Signature, typict or printed name of registered ager	nt and title if applicable (NOT	E Registere	d Age	nt signature requi	ired when reinstating)	DATE		
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	0	☐ DELETE	1.1 Ti		ļ		L] Change	Addition
NAME	ROUSE, BEN L.		1.2 N						
STREET ADDRESS	9825 HARRELL AVENUE #501 TREASURE ISLAND FL 33706				ADDRESS				
CITY - ST - ZIP TITLE	VP			1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition
NAME	ROUSE, ELIZABETH S.		2.2 N	AME					
STREET ADDRESS				2.3 STREET ADDRESS					
C:TY-ST-7IP	CLEARWATER F 34620		2.40	2. 4 CITY-ST-ZIP					
TITLE	•			3.1 TITLE		*******	Ε] Change	☐ Addition
NAM E	ROUSE, BEN L. JR.		3.2 N						
STREET ADDRESS	5541 ROOSEVELT BLVD. CLEARWATER FL 34620		- 1		ADDRESS				
CITY-ST-7IP	OLEANWAIEN FL 3402U	DELETE	3.4. C 4.1 T		ST-ZIP		T	Change	Addition
NAMÉ				NAME			_		
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP			4.4 C	ITY-S	T-ZIP				
TITLE		DELETE	5.1 T	ITLE				Change	Addition
NAME			5.2 N	AME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE		ITY-S	T-ZIP			Change	Addition
TITLE NAME			6.1 T	itle Iame			L	_i ∩iranide	LLI ADDITION
STREET ADDRESS					ADDRESS				
SINCEL ADDMESS	1		0.15	INCE	nouncoo				

14. I do hereby certify that the information supplied with this filing 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.

FILED

Jan 28 1997 8:00am

Secretary of State