

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V50307 (0)
1. Corporation Name
CUSTOM GRAPHICS OF TAMPA INC.

FILED
Jul 15 1998 8:00am
Secretary of State



Principal Place of Business
914 W RIVER DR
TEMPLE TERRACE FL 33617
US

Mailing Address
914 W RIVER DR
TEMPLE TERRACE FL 33617
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 311 APOLLO BEACH BLVD
Suite, Apt. #, etc.
22 SUITE K
City & State
23 APOLLO BEACH, FLORIDA
Zip
24 33572 Country
25 USA

2a. Mailing Address
26 924 SPINDLE PALM WAY
Suite, Apt. #, etc.
27
City & State
28 APOLLO BEACH, FLORIDA
Zip
29 33572-2010 Country
30 USA.

3. Date Incorporated or Qualified
07/06/1992

4. FEI Number
59-3132146 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COUTO, JANE M ISOBEL
914 WEST RIVER DRIVE
TEMPLE TERRACE FL 33617

10. Name and Address of New Registered Agent

81 Name JANE M. I. COUTO
82 Street Address (P.O. Box Number Is Not Acceptable)
924 SPINDLE PALM WAY
83
84 City APOLLO BEACH FL 85 Zip Code 33572-2010

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 Jane M. I. Couto P.V.D. DATE 06 July 98
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PVD	<input type="checkbox"/> DELETE
NAME	COUTO, JANE M	
STREET ADDRESS	914 W RIVER DR	
CITY-ST-ZIP	TEMPLE TERRACE FL	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	COUTO, MERARDO	
STREET ADDRESS	914 W RIVER DR	
CITY-ST-ZIP	TEMPLE TERRACE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PVD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JANE M. I. COUTO	
1.3 STREET ADDRESS	924 SPINDLE PALM WAY	
1.4 CITY-ST-ZIP	APOLLO BEACH, FL 33572-2010	
2.1 TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MERARDO COUTO	
2.3 STREET ADDRESS	924 SPINDLE PALM WAY	
2.4 CITY-ST-ZIP	APOLLO BEACH, FL 33572-2010	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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.

SIGNATURE: JANE M. I. COUTO DATE: 06 July 98 813-645-7788

CR2E034 (5/98)