

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 APR -7 PM 1:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** V51951

1. Corporation Name

**STANDARD REPRODUCTIONS INC.**

Principal Place of Business

Mailing Address

2061 S.W. 70th AVE BLDG F-4  
DAVIE, FL. 33317

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

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

10. Name and Address of New Registered Agent

STANLEY GREENBERG  
8712 N.W. 19th DR.  
Coral Springs, FL. 33071

81 Name

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

83

84 City

FL

85

Zip Code

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

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

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**PRES.**  
NAME: STANLEY GREENBERG  
STREET ADDRESS: 8712 N.W. 19th Dr.  
CITY - ST - ZIP: Coral Springs FL 33071

**VICE PRES**  
NAME: MICHAEL GREENBERG  
STREET ADDRESS: 9470 PONTIANA PLACE #101  
CITY - ST - ZIP: FT LANDER DALE, FL. 33312

**SECRETARY**  
NAME: RACHEL GREENBERG  
STREET ADDRESS: 3916 N.W. 2nd St.  
CITY - ST - ZIP: COCONUT CREEK, FL. 33023

**TREASURER**  
NAME: JULIE GREENBERG  
STREET ADDRESS: 714 15th St.  
CITY - ST - ZIP: MIAMI BEACH, FL. 33139

1.1 TITLE: VICE PRESIDENT  
1.2 NAME: MELANIE GREENBERG  
1.3 STREET ADDRESS: 8712 N.W. 19th Drive  
1.4 CITY - ST - ZIP: Coral Springs, FL 33071

2.1 TITLE:   
2.2 NAME:   
2.3 STREET ADDRESS:   
2.4 CITY - ST - ZIP:   
3.1 TITLE:   
3.2 NAME:   
3.3 STREET ADDRESS:   
3.4 CITY - ST - ZIP:   
4.1 TITLE:   
4.2 NAME:   
4.3 STREET ADDRESS:   
4.4 CITY - ST - ZIP:   
5.1 TITLE:   
5.2 NAME:   
5.3 STREET ADDRESS:   
5.4 CITY - ST - ZIP:   
6.1 TITLE:   
6.2 NAME:   
6.3 STREET ADDRESS:   
6.4 CITY - ST - ZIP:

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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)(b), Florida Statutes. I further certify that the information included 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 or 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, as applicable, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Telephone (Area #)

3/23/95 305-424-0526