## 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 # V53251

**(7)** 

ALKO PRINTING, INC.

•

Principal Place of Business

Mailing Address

## FILED May 09 1997 8:00am Secretary of State



| Transper Fields of the         | 3111033  | maining / tourose                    |                         |   |   |             |               |                   |  |
|--------------------------------|--|--------------------------------------|-------------------------|---|---|-------------|---------------|-------------------|--|
| 3208 NE 2 AVE<br>MAMI FL 33137 |  | 3208 NE 2 AVE<br>Miami FL 33137-4104 |                         |   |   |             |               |                   |  |
|                                |  |                                      |                         |   | 3. Date Incorporated or Qualified   |             |               | Report            |  |
| 2. Principal Place of          | Business   | 2a. Mailing Address                  |                         |   | 4. FEI Number   | <u></u>     |               | pplied For        |  |
|                                |  | 26                                   |                         |   | 65-0348658 Not Applicable   |             |               |                   |  |
| Suite, Apt. #, etc.            |  | Suite, Apt. #, etc.                  |                         |   | 5. Certificate of Status Desired  |             |               |                   |  |
| City & State                   |  | City & State                         | ı                       |   | Election Campaign Financing     Trust Fund Contribution                             |             |               | May Be<br>to Fees |  |
| <i>Z</i> ip                    | Country   Zip   Country   25   29   30             |                                      |                         |   | Florida Statutes Yes No   |             |               |                   |  |
| 9.                             | Name and Address of Cu                             | rrent Registered Agent               |                         |   | 10. Name and Address of New Re  | gistered Ag | jent          |                   |  |
|                                | n, <b>richaro</b> J.                               |                                      | 8                       | Name  |   |             |               |                   |  |
| 8181 NW<br>STE 120             | 154TH ST   |                                      |                         | 82 Street Address (P.O. Box Number is Not Acceptable) |   |             |               |                   |  |
| MIAMI LA                       | KES FL 33016                                       |                                      | 6;                      | 9   |   |             |               |                   |  |
|                                |  |                                      | 8                       | City  |   | FL          | <b>85</b> Zip | Code              |  |
|                                | 10-11-007  | 0500 1 007 4500 51                   |                         |   | poration submits this stalement for the pation's board of directors. I hereby accep |             |               | Iti-te-           |  |
| 2.<br>III.E PD                 | e, typicd or printed name of registere<br>OFFICERS | AND DIRECTORS                        | <b>13.</b><br>1.1 Title |   | uired when reinstating) ADDITIONS/CHANGES TO OFFIC                                  |             | DIRECTO!      | RS IN 12          |  |
|                                | OFFICERS   |                                      |                         |   | ADDITIONS/CHANGES TO OFFIC  |             |               |                   |  |
| '-                             | Jrbadjian, Kevork                                  |                                      | 1,2 NAME                |   |   |             | _ •           |                   |  |
| TREET ADDRESS 320              | 8 NE 2 AVE   |                                      | 1.3 STREE               | ET ADDRESS  |   |             |               |                   |  |
| TY-ST-ZIP MIA                  | MI FL  |                                      | 1.4 C(TY-               | ST-ZIP  |   |             |               |                   |  |
| TLE                            |  | ☐ DELETE                             | 2.1 TITLE               | 1   |   | L.          | Change        | Addit             |  |
| AME                            |  |                                      | 2.2 NAME                | J   | Fo.   |             |               |                   |  |
| TREET ADDRESS                  |  |                                      |                         | ET ADDRESS  |   |             |               |                   |  |
| ITY-ST-ZIP<br>TLE              |  | ☐ DELETE                             | 2.4 C/TY<br>3.1 TITLE   |   |   |             | Change        | Addit             |  |
| AME                            |  | —                                    | 3.2 NAME                |   |   | -           | •             |                   |  |
| TREET ADORESS                  |  |                                      | 3.3 STRE                | ET ADDRESS  |   |             |               |                   |  |
| HY-ST-ZIP                      |  |                                      | 3.4. CITY               |   |   |             | <del></del>   |                   |  |
| ITLE                           |  | DELETE                               | 4.1 TITLE               | 1   |   | Ĺ.          | Change        | Addit             |  |
| AME                            |  |                                      | 4. 2 NAM                | -   |   |             |               |                   |  |
| TREE1 ADDRESS                  |  |                                      |                         | ET ADDRESS  |   |             |               |                   |  |
| ITY - ST - ZIP<br>ILE          |  | DELETE                               | 4.4 CITY<br>5.1 TITLE   |   |   |             | Change        | ☐ Addii           |  |
| AME                            |  |                                      | 5.2 NAME                |   |   | _           |               | <del></del> · ··  |  |
| TREET ADDRESS                  |  |                                      |                         | ET ADDRESS  |   |             |               |                   |  |
| HTY-SE-ZIP                     |  |                                      | 5.4 CITY                | - 1   |   |             |               |                   |  |
| )TLE                           |  | ☐ DELETE                             | 6.1 TITLE               |   |   | I           | Change        | Addit             |  |
| IAME.                          |  |                                      | 6.2 NAM                 | E   |   |             |               |                   |  |
| TREET ADDRESS                  |  |                                      | 6.3 STAE                | ET ADDRESS  |   |             |               |                   |  |
| CITY-ST-ZIP                    |  |                                      | 6.4 CITY                | -ST-ZIP   |   |             |               |                   |  |

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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

Keverex Tourbalgo

4/90/97 Date

305 213-36.