

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90034 010 ***150.00

0068355

DOCUMENT # L21416

1. Entity Name

CENTURY GRAPHICS & METALS, INC.

Principal Place of Business

Mailing Address

3497 ALL AMERICAN BLVD.
 ORLANDO FL 32810-4722

3497 ALL AMERICAN BLVD.
 ORLANDO FL 32810-4722

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2975241**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVITT, KENNETH
3497 ALL AMERICAN BLVD
ORLANDO FL 32810

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]

Ken Levitt

1/26/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PDS	<input type="checkbox"/> Delete
NAME	LEVITT, KENNETH	
STREET ADDRESS	3497 ALL AMERICA BLVD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VDT	<input type="checkbox"/> Delete
NAME	LEVITT, JACQUELINE	
STREET ADDRESS	3497 ALL AMERICAN BLVD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	OPPENHEIMER, JACK	
STREET ADDRESS	3497 ALL AMERICAN BLVD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LEVITT, SCOTT	
STREET ADDRESS	3497 ALL AMERICAN BLVD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LEVITT, KEITH	
STREET ADDRESS	3497 All American Blvd.	
CITY-ST-ZIP	Orlando, FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LEVITT, BRETT	
STREET ADDRESS	3497 All American Blvd.	
CITY-ST-ZIP	Orlando, FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] Ken Levitt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/01

DATE

407 295-7818

DAYTIME PHONE #

CR2E034 (10/00)