

2520042392580

ALTERNATIVE REPORTING AND DISCLOSURE STATEMENT

To the Secretary of Labor:

In Compliance with the requirements of the alternative method of reporting and disclosure under Part 1 of Title I of the Employee Retirement Income Security Act of 1974 for unfunded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 C.F.R. § 2520.104-23, the following information is provided by the undersigned employer.

Name and Address of Employer: Interprint Incorporated  
12350 U.S. Highway 19 North  
Clearwater, Florida 33764

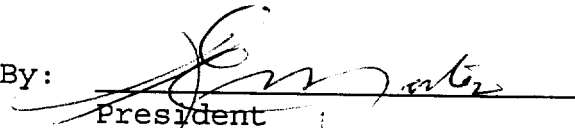
Employer Identification No.: 59-0811253

Interprint Incorporated maintains a plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

Number of Plans and  
Participants in Each  
Plan: 1 Plans covering 1 Employees

Dated April 27, 1998.

Interprint Incorporated

By:   
President  
Plan Administrator

**VICTORIA J. ALVAREZ**  
Attorney and Counselor At Law

DOL-PUBLIC  
PUBLISHED  
98 JUN 11 10 30 AM '98

May 29, 1998

VIA CERTIFIED MAIL #P 404 081 659  
RETURN RECEIPT REQUESTED

Office of Employee Benefits Security  
Labor Management Services Administration  
U.S. Department of Labor  
Washington, D.C. 20216

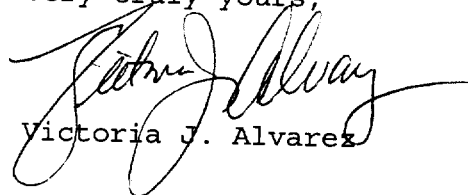
Re: Reporting and Disclosures Statement  
of Interprint Incorporated

Dear Madam or Sir:

Pursuant to Part 1 of Title I of the ERISA and Department of Labor Regulations, enclosed is an Alternative Reporting And Disclosure Statement for Interprint Incorporated.

If you should need any further information, please do not hesitate to contact the undersigned.

Very truly yours,



Victoria J. Alvarez

VJA:mb

Enclosure

cc: James E. Morton, President (w/ enc)  
Lois E. Morrison, Secretary/Treasurer (w/enc)  
Gerald R. Mann, CLU, ChFC (w/enc)  
Ray Mathis, C.P.A. (w/enc)

**VICTORIA J. ALVAREZ**  
Attorney and Counselor at Law  
P. O. Box 10858  
Tampa, FL 33679-0858

**CERTIFIED**

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**MAIL**

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