SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CORPORATION ÅNNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9600000484 (3)

COPIES DIRECT, INC.

CITY-ST-7IP



FILED

97 JUL 25 AH 11: 21

SCURE IA OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address 7555 COMMERCE CT 7555 COMMERCE CT SARASOTA FL 34249 SARASOTA FL 34243 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 3a. Date of Last Report 01/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0552152 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PREWETT, DANIEL 5757 **Be**neva RD 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34233 83 City 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 little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DCPV TITLE DELETE 1.1 TITLE ☐ Change Addition COMBS, MATTHEW 1.2 NAME **4227 PRESIDENTIAL CIR** STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 900002252546-440 2.1 TITLE -07/30/97--01066--019 COMBS, MATTHEW NAME 2.2 NAME **4227 PRESIDENTIAL CIR** ****165.00 ****165.00 STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition **MAME** 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 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





July 22, 1997

Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE: 1997 Profit Corporation Annual Report

I am enclosing a check for \$165.00 for my filing fee. I realize a first notice filing report must have been sent to me, however, I never received it. The second notice was the only bill I have received. I spoke with a representative from your office and she told me to send \$165.00 and this explanation.

Thank you.

Sincerely,

Matthew Combs