

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
04-17-2001 90082 049 ***150.00

0159762

DOCUMENT # 555057

1. Entity Name
COPY EXPRESS, INC.

Principal Place of Business
**1424 PONCE DE LEON BLVD
CORAL GABLES FL 33134**

Mailing Address
**1424 PONCE DE LEON BLVD
CORAL GABLES FL 33134**

2. Principal Place of Business
683 ELK DRIVE
Suite, Apt. #, etc.

3. Mailing Address
683 ELK DRIVE
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
MORRISTOWN, TN

City & State
MORRISTOWN, TN

4. FEI Number **59-1786105**

Applied For
Not Applicable

Zip
37814

Country
USA

Zip
37814

Country
USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**ZION, BETSEY J
6270 SW 49TH ST
MIAMI FL 33155**

7. Name and Address of New Registered Agent

Name **ANN WELLER**

Street Address (P.O. Box Number is Not Acceptable)
2701 LeJEUNE ROAD

SUITE 300

City **CORAL GABLES**

FL

Zip Code
33134

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 *Ann Weller* **ANN WELLER, CPA**

4/6/01

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

TITLE **PD** ☐ Delete
NAME **ZION, BETSEY J.**
STREET ADDRESS **6270 SW 49TH ST.**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **ZION, BETSEY J.**
STREET ADDRESS **683 ELK DRIVE**
CITY-ST-ZIP **MORRISTOWN, TN 37814**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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: *Betsy Zion* **BETSEY J. ZION**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01

Date

423-586-8403

Daytime Phone #

CR2E034 (10/00)