FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF ST.

Sandra B. Mortham

, Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # 186766

(2)

OFFICE PRODUCTS AND SERVICES, INC.

Mailing Address

FILED Jan 15 1998 8:00am Secretary of State



	es et Rusinana	Mailing Addre	000			- 1 188401 11001 10450 03511 10010 87510 3511 41011 0	(Ut) #1811 E1814	
,	ce of Business	•						
208 AVENUE FT PIERCE F		208 AVENUE FT PIERCE F	: A FL 34950-1397					
111111021	2 04000-1007	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 0 1000 1001			DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualified 07/25/1955		
2. Principal P	Place of Business	2a. Mailing Ad	ddress			4. FEI Number	.	Applied For
21		26	26			59-0748072		Not Applicable
Suite, Apt	#, etc.	Suite, Apt	. #, etc.			5. Certificate of Status Desired	T	5 Additional
22		27				5. Cermicate of Status Desired 🖂	Fee	Required
City & Stat	ite	City & Sta	ate			6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution	. Add	ed to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the		
24	25	29	30	L.,		Personal Property Tax due June 30.	☐ Yes	□ No
	9. Name and Address of Cu	rrent Registered Ager	nt			10. Name and Address of New Register	a Agent	
	LLMAN, ROBERT C			81	Name			
5211 S INDIAN RIVER DR				82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
FT	PIERCE, FL 34982							
				83				
				84	City		. 85 4	Zip Code
				1	'	F		•
11. Pursuant	t to the provisions of Sections 607	.0502 and 607.1508, FI	lorida Statutes, t	the above	e-named corp	poration submits this statement for the purposition's board of directors. I hereby accept the a	of changir	ig its registered
office or a	registered agent, or both, in the S am familiar with, and accept the o	itate of Florida, Such cr	nange was auth 307.0505, Florida	orized by a Statute:	y ine corpora s.	tions poard or directors, thereby accept the a	фронитен	as registered
SIGNATURE			_		•			
SIGNATURE	Signature, typed or printed name of registers	ed agent and title if applicable.	(NOTE: Re	gistered Age	ent signature requi	red when reinstating) DATE		
12.		AND DIRECTORS		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	L	DELETE	1.1 TITLE			Chan	ge 🔛 Addition
NAME	TILLMAN, ROBERT C	•	•	1.2 NAME				
STREET ADDRESS		ı.	ŀ	1.3 STREET	ADDRESS			
CITY-ST-ZIP	FT PIERCE FL			1.4 CITY - 9	ST-ZIP			
TITLE	SD							
] 11104	==	L.	DELETE	2.1 TITLE		3333	☐ Chan	ge 🔲 Addition
NAME	DICKSON, PAMELA T	<u> </u>	DELETE	2.1 TITLE 2.2 NAME			☐ Chan	ge 🔲 Addition
i	DICKSON, PAMELA T	L.	DELETE		ADDRESS		☐ Chan	ge 🔲 Addition
NAME STREET ADDRESS	DICKSON, PAMELA T	<u> </u>	DELETE	2.2 NAME				
NAME	DICKSON, PAMELA T 4002 OLEANDER AVE.		DELETE	2.2 NAME 2.3 STREET			☐ Chan	
NAME STREET ADDRESS CITY-S1-ZIP	DICKSON, PAMELA T 4002 OLEANDER AVE. FT. PIERCE FL			2.2 NAME 2.3 STREET 2. 4 CITY -				
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NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	DICKSON, PAMELA T 4002 OLEANDER AVE. FT. PIERCE FL V THOMAS, SUSAN L. 6425 RIVERLAND DR	<u> </u>		2.2 NAME 2.3 STREET 2.4 CITY-: 3.1 TITLE 3.2 NAME 3.3 STREET	ST-ZIP			ge Addition
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4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(0), 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:

Pash-CITZ FMILLET

1/6/98

CR2E034 (10/97)