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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 255462

MODERN STATIONERY INC

FILED	
May 08 1998 8:00an	n
Secretary of State	

Principal Place of Business Mailing Address 17710 ALFRED ST 17710 ALFRED STREET MONTVERDE FL 34758 MONTVERDE FL 34756 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1962 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-0965914 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution П Added to Fees Country Ζıp Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent VALDES NI, JOSE M Name 17710 ALFRED ST 82 Street Address (P.O. Box Number is Not Acceptable) **MONTVERDE FL 34756** 83 City Zip Code 85 11. Pursuant to the provisions of Sociions 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, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE 1.1 TITLE Change Addition VALDES, JOSE M JR. NAME 1.2 NAME **309 W BAY ST** STREET ADDRESS 1.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 1.4 CRTY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE VALDES, JOSE M NI NAME 2.2 NAME 17715 ALFRED ST STREET ADDRESS 2.3 STREET ADDRESS MONTVERDE FL CITY-ST-ZW 2. 4 CITY-ST-ZIP SI DELETE Change Addition TITLE 3 1 TITLE VALDES, RUTH NAME 3.2 NAME 309 W BAY ST STREET ADDRESS 3 3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 3.4, CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME STREET AMORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 annual report or suppliemental 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 original report of the corporation of the corporation of the corporation or the receiver of the corporation of the

SIGNATURE:

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