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

**FILED** May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (1)508965 BROWARD BUSINESS FORMS, INC. Principal Place of Business Mailing Address 10187 182ND LANE S. BOX 5936 LIGHTHOUSE PT FL 33074 **BOCA RATON FL 33498** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/23/1976 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1681791 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. □ No 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RIZZI. PATRICK M 10187 182ND LANE SOUTH Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33498** 83 84 City 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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or pointed many of registered agont and title if approable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change 1.1 TITLE TITLE RIZZI, PARTICK M NAME 1.2 NAME 10187 182ND LANE SOUTH. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 DITY-ST-ZIP DELETE Change Addition TITLE 2.1 THE RIZZI, WILMA 2.2 NAME 10187 182ND LANE SOUTH. 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY - S1 - ZIP DELFTE Change Addition TITLE 3.1 TITLE 3 2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change TITLE DELETE 4.1 THEF Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CHY-ST-ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE

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 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

63 STREET ADDRESS 6.4 CITY - ST- ZIP

6.2 NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Pater la Propos

4/20/68 (511)429-0286