FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT		Sandra B. Mortham Scorelary of State DIVISION OF CORPORATIONS		IONS		
DOCUMENT #	842480	(6)				
VERSA CONTRACT	PRODUCTS, INC.	, ,				nic álbir álbir álbir bjórf alþir bjórf kábr
Friends of Charles a		Eve Add year				
Principal Place of Business 20112 NORTHCOTE DRIVE		ling Address 7636 75TH ST				
BOCA RATON FL 33434	-	ALEM WI 53168				
	_	•			3. Date Incorporated or Qualified 01/29/1979	3a. Date of Last Report 04/26/1995
2. Principa' Place of Basiness . I	F 1	Mailing Address			4. FEI Number	Applied For
t Suite, Apt. #, etc.	[26]	Surte, Apl. #, etc.			59-1863054	Not Applicable \$8.75 Additional
2	27	()				Fee Required
City & State 3	28	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zg) [Gc 4	ountry 29	Zip	Countr	ŷ	8. This corporation has liability for inta	angible tax under s 199.032,
1 1	ddress of Current Registe	ered Agent			10. Name and Address of New Reg	<u> </u>
CT CORPORATION SYS	TEM		8			
1200 S. PINE ISLAND R			8:		ress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324			8:	3		
			8	4 City		FL 85 Zip Code
SIGNATURE	none of regulated agriculated the dia OFFICERS AND DIRECT	glicario (NC		ert signature require		DATE
THE ST		DELETE	1. 1 TITU	F	ADDITIONS/CHANGES TO OFFICE	Change Addition
.199 MICECH, PAI 1981 495655 27636 75TH			1.2 NAMI			
11 SI ZIP SALEM M	o.		1.4 CiTY	ET ADDRESS - ST-ZIP		
PD CAUTA APRIL	LAMBADAN	DEFFTE	2 1 TITL			Change Addition
SMITH, NEIL SIBER ADDRESS 1184 CAREY			2.2 NAM 2.3 STRE	EL ADORESS		
OAKVILLE, O			2 4 CITY			
II LE VAME		DELETE	3 1 1:TL 3 2 NAM			Change Addition
STREET ANOBISS				EFT ADDRESS		
OLY ST ZIE		[] DELETE	34 GITY 4.1 TITL			Change Addition
NAME			42 NAM	!		El ounde El videnou
SUBJET ADDRESS				ET ADDRESS		
Crt v - S1 - Z0F 1 TFF		DELETE	4.4 CHTY 5.1 THTL	-ST-ZIP F		☐ Change ☐ Addition
NAM!			5 2 NAM	r		_
STREET ADDRESS CONTISTAZZ				ET ADDRESS - ST-ZIF		
101F		DFLETE	6 1 THE			Change Addition
NAME CARLA LACIDIO CO		^	6.2 NAM			
STREET ACORESS CITY - ST - ZIP		λ		· ST-ZIP		
14. I do hereby certify that the inf	ormation supplied with this licated on this annual report	: o/ ≰uppled tantal enr	nished and do nual report is	pes not qualify true and accur	for the exemption stated in Section 119.07 ate and that my signature shall have the sa	ame legal effect as if made under
14. I do hereby certify that the information inconfit, that I am an officer or dappears in Black 12 or Block SIGNATURE:	ficated on this annual report frector of the corporation or	o supples intal and the recitive or trusts	nual report is i se empowere dress.	true and accur	ate and that my signature shall have the sa iis report as required by Chapter 607, Flori (2014)	ame legal effect as if made i

SIGNATURE AND TYPED OR PRINTED LANG OF SIGNING OFFICER OR DIRECTOR