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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(3)

TAPE PRODUCTS COMPANY

KOHLEM, ROBERT

**CINCINNATI OH** 

11630 DEERFIELD RD.

NAME

STREET ADDRESS

**SIGNATURE:** 

Principal Place of Business Mailing Address  11630 DEERFIELD RD 11630 DEERFIELD RD CINCINNATI OH 45242 CINCINNATI OH 45242								
					3. Date incorporated or Qualif 04/02/1981		te of Last Report 04/24/1995	
2. Principal Pl	2a. Mailing Address	ing Address		4. FEI Number 31-0731346	4. FEI Number Applied For 31-0731346 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	· 🗖	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financir     Trust Fund Contribution	'g 🗀	\$5.00 May Be Added to Fees	
Zip -	Country 25	Zip 29	Count	ry	8. This corporation has liability Florida Statutes	y for intangible Yes □ No	tax under s 199.032,	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of No	ew Registered	d Agent	
BEAUCHAMP, GERALD TAPE PRODUCTS CO.				<ol> <li>Name</li> <li>Street</li> </ol>	ddress (P.O. Box Number is Not Acceptable)			
4109-34TH ST S.W. ORLANDO FL 32811			8					
				84 City FL 85 Zin Coo			85 Zip Code	
or register	red agent, or both, in the State of Florid th, and accept the obligations of, Section Signature, typed or printed name of registered agent	da. Such change was authorize ion 607.0505, Florida Statutes.	ed by the co	rporation's	corporation submits this statement for the s board of directors. I hereby accept the required when reinstaling)	appointment a	as registered agent. I am	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	V	☐ DELETE	1. 1 TITL	E			Change Addition	
NAME	JIMENEZ, CARLOS 11630 DEERFIELD RD	AN DEEDELEI D. DD		e Et address				
STREET ADDRESS	CINCINNATI, OH 00000							
CITY-ST-ZIP	VD			- ST - ZIP E	☐ Change		Change Addition	
NAMé	MARTIN, MICHELE							
STREET ADDRESS	11630 DEERFIELD RD CINCINNATI, OH 00000		2.3 STRE	ET ADDRESS				
C(1Y - S1 - Z(P	SD SD	E3 pri cir	2 4 Cily				Change Addition	
TILLE	I	DELETE 3 1					Change Addition	
NAME	FETTE, WILLIAM J 11630 DEERFIELD RD		3 2 NAM					
STREET ADDRESS	1			EET ADDRESS	<b>;</b>			
CITY - S* - 7IP	CINCINNATI, OH 00000	FT DELETE		-ST-ZIP			Change C Addition	
TITLE	PD COTTO IANGT E	DELFTE	4 1 TITE				☐ Change ☐ Addition	
NAME STREET ADDRESS	FETTE, JANET F 11630 DEERFIELD RD		4.2 NAM 4.3 STRE	E Et address				
CITY-ST-ZIP	CINCINNATI, OH 00000		1	-ST-ZIP				
THILE	TD	DELETE	5 1 TiTL		VZ		Change  Addition	
NAME	GABBARD, R. STEPHEN	<u></u>	5 2 NAM				• · · —	
STHEET ADDRESS	11630 DEERFIELD RD			ET ADDRESS	;			
CITY-ST-ZIP	CINCINNATI, OH 00000		5 4 CITY	- \$T - 7IP				
717.5	V	L_1 DELETE	6 1 7(7)	E .			☐ Change ☐ Addition	

62 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or an attachment with an address.