1-13-95 B-0195-C

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 18 PM 3:55

DOCUMENT # F28935 (7)

1. Corporation Name
PAN AMERICAN COPYING SUPPLY, INC.

Principal Place of Business	Mailing Address
3502-B NW 10TH AVE BOX 5151 FT LAUDERDALE FL 33310	~~3502-B NW 10TH AVE~~ ~~BOX 5151~~ ~~FT LAUDERDALE FL 33310~~ P.O. BOX 5151 FT LAUDERDALE FL 33310

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21)	2a. Mailing Address (26)	3. Date Incorporated or Qualified: 04/08/1981	3a. Date of Last Report: 02/02/1994
Suite, Apt. #, etc (22)	Suite, Apt. #, etc (27)	4. FEI Number: 59-2087450	☐ Applied For ☐ Not Applicable
City & State (23)	City & State (28)	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip (24) / Country (25)	Zip (29) / Country (30)	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: X Yes ☐ No	

9. Name and Address of Current Registered Agent

ENDER, REINA
3502 NW 10 AVENUE
FT. LAUDERDALE FL 33310

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [illegible] (DATE)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: PD NAME: ENDER, REINA STREET ADDRESS: ~~3502-B NW 10TH AVE~~ CITY-ST-ZIP: ~~FT LAUDERDALE, FL 00000~~	☐ Change X Addition TITLE: SAME NAME: SAME STREET ADDRESS: 2179E N POWERLINE ROAD CITY-ST-ZIP: Pompano Beach, Fla. 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing, including any voluntarily furnished cost data, 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.

SIGNATURE: [signature] 1/12/95 (305) 975-5513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0240050 CP