

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001998

1. Entity Name

KINKO'S NETWORK, INC.

FILED

Mar 25, 2000 8:00 am
Secretary of State

03-25-2000 90009 042 ***159.00

Principal Place of Business

Mailing Address

255 WEST STANLEY AVENUE
VENTURA CA 93002

STATE TAX RESOURCES GROUP
18006 SKYPARK CIRCLE #201
IRVINE CA 92614-6406

2. Principal Place of Business

3. Mailing Address

c/o Ernst & Young

Suite, Apt. #, etc.

18006 Skypark Circle, #201

City & State

Irvine, CA

Zip

92614

Country

U.S.

4. FEI Number

77-0443979

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1800 South Pine Island Road

City

Plantation

FL

Zip Code

33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PCEO	<input type="checkbox"/> Delete
NAME	HARDIN, JOSEPH S JR	
STREET ADDRESS	255 WEST STANLEY AVENUE	
CITY-ST-ZIP	VENTURA CA 93002-8000	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	STEWART, NEIL	
STREET ADDRESS	255 WEST STANLEY AVENUE	
CITY-ST-ZIP	VENTURA CA 93002-8000	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MUNDRAKE, LISA	
STREET ADDRESS	255 WEST STANLEY AVE	
CITY-ST-ZIP	VENTURA CA 93002-8000	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KRAUSE, BRADLEY	
STREET ADDRESS	255 WEST STANLEY AVENUE	
CITY-ST-ZIP	VENTURA CA 93002-8000	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ORFALEA, PAUL	
STREET ADDRESS	255 WEST STANLEY AVENUE	
CITY-ST-ZIP	VENTURA CA 93002-8000	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	PUND, MARY	
STREET ADDRESS	255 WEST STANLEY AVENUE	
CITY-ST-ZIP	VENTURA CA 93002-8000	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Nussbaum, Bennett	
STREET ADDRESS	255 W. Stanley Ave.	
CITY-ST-ZIP	Ventura, CA 93002	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cornell, Jim	
STREET ADDRESS	255 W. Stanley Ave.	
CITY-ST-ZIP	Ventura, CA 93002	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hardin, Joseph S. Jr.	
STREET ADDRESS	255 W. Stanley Ave.	
CITY-ST-ZIP	Ventura, CA 93002	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cornell, Jim	
STREET ADDRESS	255 W. Stanley Ave.	
CITY-ST-ZIP	Ventura, CA 93002	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Nussbaum, Bennett	
STREET ADDRESS	255 W. Stanley Ave.	
CITY-ST-ZIP	Ventura, CA 93002	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)