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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

G91620 **DOCUMENT #**

(6)

RIBBONS: CARTRIDGES & SPOOLS, INC.

Principal Place of Business	Mailing Address	
% RICHARD T. REDCAY 3800-70TH AVENUE, N.	% RICHARD T. REDCAY 3800-70TH AVENUE. N.	



Principal Place	of Business		Ma	ailing Address				I IMMAIIA MAIM TAIAN LAMAM MUNIM NU	ELI MANI ATATI EJRI	i (1819 i	IBN BIBN BIBN IBBI
Principal Place of Business * RICHARD T. REDCAY 3800-70TH AVENUE. N. PINELLAS PARK FL 34665				% RICHARD T. RED 3800-70TH AVENUE.	N.						
PINELLAS P	PARK FL 3466	5	1	Pinellas Park Fl	34665			3. Date Incorporated or Qualified 03/16/1984	3a. Date	of Last 5/01/	
2. Principal Pla 21	ace of Busine	ss	2a.	Mailing Address				4. FEI Number 59-2382412			Applied For Not Applicable
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired			75 Additional € Required
City & State	e			City & State				6. Election Campaign Financing			.00 May Be
23			28					Trust Fund Contribution			ded to Fees
Zip		Country		Zip	Cou	untry		8. This corporation has liability for		c under	s 199.032,
24		25	29		30	,			s 🔲 No		
	g, Name	and Address of Cu	rrent Regist	tered Agent		1041		10. Name and Address of New	Registered A	gent	
						81	Name				
	(Y, RICHAR 8TH ST. N.) T.				82	Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
PINELL	AS PARK F	L 33565				83				•	
						84	City			85	Zip Code
						1	•		FL		•
familiar wi	red agent, or	both, in the State of i of the obligations of, s	Section 607.0	0505, Florida Statuti	es.						
or register familiar wi SIGNATURE	red agent, or ith, and accer	of the obligations of, so	Section 607.0	0505, Florida Statuti policable (es.	tnegA b	signature required	d when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIREC	TORS IN 12
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certify that the information indicated oath; that I am an officer or director appears in Block 12 or Block 13 if cl plemental annual report is true and accurate and that my signature shall have the same legal effect as if made unde eiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: