

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DEPARTMENT OF CORPORATIONS

1996-2-28-96 B-1043 C
DOCUMENT # H60845 (5)

1. Corporation Name

TOTAL REPRODUCTIONS, INC.

Principal Place of Business

4915 BEACH BLVD., #1
JACKSONVILLE FL 32207

Mailing Address

4915 BEACH BLVD., #1
JACKSONVILLE FL 32207



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

06/06/1985

3a. Date of Last Report

06/13/1995

4. FEI Number

59-2545686

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

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 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BLAQUIERE, DAVID
4217 POLO CT.
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name David Blaquiere
82 Street Address (P.O. Box Number is Not Acceptable)
12217 Springmoor Three Ct.
83
84 Jacksonville FL 85 Zip Code 32225

11. Pursuant to the provisions of Sections 607.0102 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 607.0103, Florida Statutes.

SIGNATURE

Signature of Corporation, if the corporation is a corporation

Signature of Registered Agent, if the agent is a corporation

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	5. DELETE
VP	BOWLING, JAMES P.	13745 ALESBURY CT.	JACKSONVILLE FL	☐
P	BLAQUIERE, DAVID J.	12217 SPRINGMOOR THREE CT.	JACKSONVILLE FL	☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP	5. DELETE	6. CHANGE	7. ADDITION
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
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				☐	☐	☐
				☐	☐	☐

14. I do hereby certify that the information supplied in 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 12 or Block 13 if changed. I am an individual with an address.

SIGNATURE:

David Blaquiere
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/96

904376-2573

CR2E034 (12/95)