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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H61078

TAPEX CORPORATION Principal Place of Business Mailing Address % A. ROBERT CONINGSBY % A. ROBERT CONINGSBY 3000 N.E. 12 TERRACE 3000 N.E. 12 TERRACE FT. LAUDERDALE FL 33334-4403 FT. LAUDERDALE FL 33334 3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1985 08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2546926 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Zip Country This corporation has liability for intangible tax under s. 199 032, Yes ☐ No 24 30 Florida Statutes 25 28 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CONINGSBY, TODD D. 3000 NE 12 TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33334 83 84 City 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 Signature, typical or printed name of registered agent and tituit applicable DATE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. (96/6)Addition DELETE 1.1 TITLE Change THEE CONINGSBY, A. ROBERT III NAM 1.2 NAME 3000 N.E. 12 TERRACE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY-ST-ZIP CITY - \$1 - ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE CONINGSBY, TODD 22 NAME NAME 3000 N.E. 12 TERR. 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2.4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE CONINGSBY, GREGG O. NAME 3.2 NAME 3000 NE 12 TERRACE STREET ADDRESS 3.3 STREET ADDRESS FT. LAUDERDALE FL 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 4.1 TITLE THILL CONINGSBY, RUSSELL W. 4. 2 NAME NAME 3000 NE 12 TERRACE STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL CITY - S1 - 7/P 4.4 CITY-ST-ZIP DELETE Channe ___ Addition TOTALE 5.1 TITLE 52 NAME **5.3 STREET ADDRESS** STREET ACIDRESS 5.4 City-St-ZIP CITY-\$1-ZIP DELETE Change ___ Addition 61 TITLE DITTE NAME 6.2 NAME STEEL LADORESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

FILED May 15 1997 8:00am Secretary of State

14. To 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 inclinated 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 anged, or on an attachment with an address

SIGNATURE:

appears in Block 12 or Block

CITY-ST-ZIP

TOOD COMMISS

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