

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 30, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90025 048 \*\*\*150.00

**DOCUMENT # K06749**

1. Entity Name

**AMERICAN RIBBON & TONER COMPANY, INC.**

Principal Place of Business

**OYO GARY EMERT**  
**2895 W. PROSPECT RD.**  
**FT. LAUDERDALE FL 33309**

Mailing Address

**OYO GARY EMERT**  
**2895 W. PROSPECT RD.**  
**FT. LAUDERDALE FL 33309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**65-0026740**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**EMERT, GARY**  
**2895 W. PROSPECT RD.**  
**FT. LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name

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

**2895 W. Prospect Road**

City

**ft. Lauderdale,**

**FL**

Zip Code **33309**

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

*Richard Blumberg* **RICHARD BLUMBERG**

**5/23/02**

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, 2002 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 **D** ☐ Delete  
 NAME **EMERT, GARY**  
 STREET ADDRESS **2895 W. PROSPECT RD.**  
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D, VP** ☐ Change ☒ Addition  
 NAME **Ladoff, Dennis**  
 STREET ADDRESS **2895 W. Prospect Road**  
 CITY-ST-ZIP **ft. Lauderdale, FL 33309**

TITLE **D, S** ☐ Change ☒ Addition  
 NAME **BLUMBERG, RICHARD**  
 STREET ADDRESS **2304 Bay Dr**  
 CITY-ST-ZIP **Porto Rico Beach, FL 33082**

TITLE **D, P** ☐ Change ☒ Addition  
 NAME **Beland, John**  
 STREET ADDRESS **18 NW 18th St**  
 CITY-ST-ZIP **Delray Beach, FL 33444**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Richard Blumberg* **RICHARD BLUMBERG**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Secretary*

**5/13/02**  
 Date

**954-733-4552**  
 Daytime Phone #

CR2E034 (9/01)