2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 12, 2004 8:00 am Secretary of State **DOCUMENT # K06749** 1. Entity Name 04-12-2004 90661 004 ***150.00 AMERICAN RIBBON & TONER COMPANY, INC. Principal Place of Business Mailing Address OVO GARY EMERT & A. GLUDGLY 2895 W. PROSPECT RD. FT. LAUDERDALE FL 33309 G/O GARY EMERT % A. BWASELE 2895 W. PROSPECT RD. FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE City & State City & State 4. FEI Number Applied For 65-0026740 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Number is Not Acceptable) BLUMBERG, RICHARD 2895 W. PROSPECT RD. he b FT. LAUDERDALE FL 33309 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DVP TITLE Delete TITLE ☐ Change Addition LADOFF, DENNIS NAME NAME 2895 W. PROSPECT RD. STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-2IP CITY-ST-ZIP DS TITLE ☐ Delete ☐ Change TITLE Addition BLUMBERG, RICHARD NAME NAME STREET ADDRESS 2304 BAY DRIVE STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33062 CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME-NAME BELARDO, JOHN-STREET ADDRESS 18 NW 18TH STREET STREET ADDRESS CITY-ST-ZIP **DELRAY BEACH FL 33444** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED