## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State DOCUMENT # K06749 1. Entity Name 03-22-2007 90008 049 \*\*\*150.00 AMERICAN RIBBON & TONER COMPANY, INC. Principal Place of Business Mailing Address C/O R. BLUMBERG C/O R. BLUMBERG 60027125 6500 NW 15TH AVE STE 300 6500 NW 15TH AVE STE 300 FT. LAUDERDALE, FL 33309 FT. LAUDERDALE, FL. 33309 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01022007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 65-0026740 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLUMBERG, RICHARD Street Address (P.O. Box Number is Not Acceptable) 2895 W. PROSPECT RD FT. LAUDERDALE, FL 33309 Zip Code City FL 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) \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE X Delete TILE Change Change LADOFF, DENNIS LABOFF, Dewals NAME NAME 2895 W. PROSPECT RD. 3499 BAKI WAT STREET ADDRESS STREET ADDRESS POMPANE BUILD PL CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP 33069 TITLE ☐ Delete ☐ Change ■ Addition **BLUMBERG, RICHARD** NAME NAME 2304 BAY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP POMPANO BEACH, FL 33062 ☐ Addition TID F TITLE ☐ Channe Delete NAME **BELARDO, JOHN** NAME STREET ADDRESS 18 NW 18TH STREET STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33444 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TTDE NAME 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 ■ Addition Delete TITLE TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY ST - 71P CITY-ST-7IP

FILED

Mar 22, 2007 8:00 am

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 cath; 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.

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