## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 ·

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # K16264

1. Corporation Name

AFFORDABLE CARTRIDGE & TONER DEPOT, INC.

## **FILED** Mar 22, 1999 8:00 am **Secretary of State**

03-22-1999 90039 011 \*\*\*150.00



Principal Place	e of Business	Mailing Address	Mailing Address				Liffielli fill tille ditte train still sidt alder dent seste aller aller aller					
7154 N UNIVER		7154 N UNIVERSITY D	7154 N UNIVERSITY DRIVE									
SUITE 211	•··· •···· <del>·</del>	SUITE 211								_		
TAMARAC FL 3	3321	TAMARAC FL 33321	TAMARAC FL 33321				DO NOT WRITE IN THIS SPACE					
						Į.	3. Date Incorporated or Qualifed				}	
							02/26/1988					
Principal Place of Business     2a. Mailing Address							7			ied For		
21 3681 N.W. 124 Avenue 26							65-0030278			Not	Applicable	
Suite, Apt.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required					
22		27	27									
City & State		City & State	City & State				6. Election Campaign Financing \$5.00 May Be					
23 a Coco	l Spring Fl	28		<del></del>			Trust Fund Contribution		Ac	ided to	Fees	
Zip_	Country	Zip		ountry			8. This corporation owes the curr	ent year Inta				
24 3300	65 25 USA	29	30				Personal Property Tax.		YS Yes	3 [	No	
	9. Name and Address of Curro	ent Registered Agent				1	0. Name and Address of New I	Registered A	\gent			
				81	Name	)						
english, william R.					044		/D.O. D. Niverbas is Not Assert	able\				
10491 N.W. 66 STREET				82	82 Street Address (P.O. Box Number is Not Acceptable)							
PARKLAND FL 33076-2913												
				83	1							
: I				84	City			FL	85	Zip Co	ode	
	·			ļ	L					na ito a	naistorad	
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change w	ras authori:	zed by	the corp	oration's	board of directors. I hereby accep	ot the appoir	tment	as regi	stered	
SIGNATURE												
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (	NOTE: Regist	ered Ager	nt signature	required who		DATE				
12.		AND DIRECTORS		3.		<u>.</u>	ADDITIONS/CHANGES TO OF	FICERS AN				
TITLE	PV □ DELETE			1.1 TITLE					☐ Ch	ange	☐ Addition	
NAME	ENGLISH, WILLIAM R.		1.	2 NAME		İ					ļ	
STREET ADDRESS	10491 NW 66 STREET			1.3 STREET ADDRESS		s						
CITY-ST-ZIP	PARKLAND FL 33076-2913		1.	4 CITY-S	T-ZIP							
TITLE	ST DELETE			2.1 TITLE					☐ Ch	ange	☐ Addition	
NAME	ENGLISH, BONNIE E.		2.	2 NAME			•				į	
STREET ADDRESS	10491 NW 66 STREET		2	3 STREE	T ADDRESS	s						
CITY-ST-ZIP	PARKLAND FL 33076-2913		2	4 CITY-5	ST-ZIP							
TITLE	15.	☐ DELET	E 3.	1 TITLE					Ch	ange	Addition	
NAME	•		3.	2 NAME								
STREET ADDRESS			3.	3 STREE	T ADORESS	3	-					
CITY-ST-ZIP			3.	4. CITY-5	ST-ZIP	<u> </u>						
TITLE		☐ DELET	E 4	1 TITLE					☐ Ch	ange	☐ Addition	

6.4 CITY-ST-ZIP CITY-ST-ZIP. 14. 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 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 chapted, or on an attachment with an address, with all other like empowered.

4. 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

□ DELETE

3-15-99

954-752-1596

Change

☐ Change

☐ Addition

Addition