

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

**FILED**

**Jun 03 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # K38632 (1)**

1. Corporation Name  
**COPIER PRODUCTS INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>13279 SW 124TH ST MIAMI FL 33186</b>	Mailing Address <b>13279 SW 124TH ST MIAMI FL 33186</b>
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3. Date Incorporated or Qualified <b>10/13/1988</b>	
4. FEI Number <b>65-0076418</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	25
29	30

9. Name and Address of Current Registered Agent

**ACUNA, MARTIN WMILIO  
15601 SW 137 AVE  
MIAMI FL 3377**

10. Name and Address of New Registered Agent

81 Name <b>Acuna, Martin Emilio Jr.</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>13256 SW 110 Terr. -3</b>	
83	
84 City <b>Miami</b>	85 Zip Code <b>FL 33186</b>

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PO</b>	NAME <b>ACUNA, MARTIN EMILLIO</b>	1.1 TITLE <b>PO</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>15601 SW 137 AVE</b>	CITY-ST-ZIP <b>MIAMI FL</b>	1.2 NAME <b>Acuna, Martin Emilio</b>	1.3 STREET ADDRESS <b>13256 SW 110 Terr. -3</b>
TITLE <b>TD</b>	NAME <b>ACUNA, MARTIN JR</b>	1.4 CITY-ST-ZIP <b>Miami, Fl. 33186</b>	2.1 TITLE <b>TD</b>
STREET ADDRESS <b>14670 SW 150 ST</b>	CITY-ST-ZIP <b>MIAMI FL</b>	2.2 NAME <b>Acuna, Martin Jr.</b>	2.3 STREET ADDRESS <b>13256 SW - 110 Terr - 3</b>
TITLE <b>TD</b>	NAME <b>ACUNA, MARTIN SR</b>	2.4 CITY-ST-ZIP <b>Miami, Fl.</b>	3.1 TITLE <b>TD</b>
STREET ADDRESS <b>14670 SOUTHWEST 150 STREET</b>	CITY-ST-ZIP <b>MIAMI FL</b>	3.2 NAME <b>Acuna, Martin Sr.</b>	3.3 STREET ADDRESS <b>14670 SW 110 Terr - 3</b>
TITLE	NAME	3.4 CITY-ST-ZIP <b>Miami, Fl. 33186</b>	4.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	4.2 NAME <b>JC</b>
TITLE	NAME	4.3 STREET ADDRESS	4.3 STREET ADDRESS <b>6/3</b>
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	5.1 TITLE
TITLE	NAME	5.2 NAME	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.3 STREET ADDRESS
TITLE	NAME	5.4 CITY-ST-ZIP	5.4 CITY-ST-ZIP
STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.1 TITLE <b>200002549852</b>
TITLE	NAME	6.2 NAME	6.2 NAME
STREET ADDRESS	CITY-ST-ZIP	6.3 STREET ADDRESS	6.3 STREET ADDRESS <b>-06/05/98--01103--018</b>
TITLE	NAME	6.4 CITY-ST-ZIP	6.4 CITY-ST-ZIP <b>***150.00</b>

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 changed, or on an attachment with an address.

SIGNATURE **Martin E Acuna Jr** **94-28-98**

CR2E034 (10/97)