2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Feb 16, 2004 8:00 am
Secretary of State
02-04-2004 90046 016 ***150.00

MOORE CR2E034 (11/03)

DOCUMENT # L38847

1. Entity Name

CIBU BUSINESS MACHINES AND OFFICE SUPPLIES, INC.

Principal Place of Business	Mailing Address
% JOHN H. LEGVOLD 406 CANAL STREET NEW SMYRNA BEACH FL 32168	% JOHN H. LEGVOLD 406 CANAL STREET NEW SMYRNA BEACH FL 32168

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2988386 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEGVOLD, JOHN H.
406 CANAL STREET
NEW SMYRNA BEACH FL 32069

7. Name and Address of New Registered Agent

Name LINDA G. MYERS
Street Address (P.O. Box Number is Not Acceptable) 406 CANAL STREET
City NEW SMYRNA BEACH FL Zip Code 32168

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 Linda G. Myers DATE 1-26-04

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
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEGVOLD, JOHN H. 406 CANAL STREET NEW SMYRNA BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LINDA G. MYERS 406 CANAL STREET NEW SMYRNA BCH, FL 32168	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEGVOLD, CONNIE L. 406 CANAL STREET NEW SMYRNA BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY / TREASURER R. LEE MYERS 406 CANAL STREET NEW SMYRNA BCH, FL 32168	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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.

SIGNATURE: Linda G. Myers (LINDA G. MYERS) 1-26-04 386-428-2034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #