

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90274 044 ***150.00

DOCUMENT # L40118

1. Entity Name
WORLD OFFICE PRODUCTS MANUFACTURING, INC.

Principal Place of Business Mailing Address
6073 NW 167TH ST C-5 **6073 NW 167TH ST C-5**
MIAMI FL 33015 **MIAMI FL 33015**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number Applied For
65-0163696 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEGAL INFORMATION SERVICES INC.
1290 WESTON RD
SUITE 300
WESTON FL 33326

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P MOSS, DAVID M. 2700 SUNSET DR SUNSET ISLAND #2 MIAMI BEACH FL 33140	<input type="checkbox"/>		
ST MONTELONGO, SYLVIA 2700 SUNSET DR SUNSET ISLAND #2 MIAMI BEACH FL 33140	<input type="checkbox"/>	MOSS, SYLVIA M.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
V CONNORS, ROBERT M. 4700 PIERCE STREET HOLLYWOOD FL 33021	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>	V WAYNE, BRIAN D. 8101 SW 62 CT. MIAMI, FL 33143	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with another, or otherwise empowered.

SIGNATURE: *DAVID M. MOSS* APRIL 25, 2002 305-825-4560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)