2005 FOR PROFIT CORPORATION ANNUAL REPORT

2/9/2

FILED
Mar 11, 2005 8:00 am
Secretary of State
02-09-2005 90038 048 ***150.00

DOCUMENT # L42360

1. Entity Name
ACCO INC.

Principal Place of Business	Mailing Address
12539 SW 128 ST MIAMI, FL 33186	12539 SW 128 ST MIAMI, FL 33186

66004518

02012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0182701
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GODOY, NESTOR V.
11320 SW 120 ST
MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE

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 _____ DATE
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, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GODOY, NESTOR V.
STREET ADDRESS	11320 SW 120 ST
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	VD
NAME	GODOY, ESPERANZA
STREET ADDRESS	11320 SW 120 ST
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	VD
NAME	AGUILAR, LEONARDO
STREET ADDRESS	13405 SW 113 CT
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 NESTOR GODOY 03/03/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #