

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M20735 (0)

1. Corporation Name

APRICOT OFFICE SUPPLIES & STATIONERY, INC.



Principal Place of Business

386 N.E. 191 STREET
MIAMI FL 33179
US

Mailing Address

386 N.W. 191 STREET
MIAMI FL 33179
US

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 386 N.E. 191 Street

22 City & State

27 City & State
miami, FL

23 Zip

Country

28 Zip

Country

24

25

29 33179

30 U.S.A.

9. Name and Address of Current Registered Agent

SILVERA, GREGORY A.
386 N.E. 191 STREET
MIAMI FL 33179

3. Date Incorporated or Qualified

09/17/1985

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2663744

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of the person named as registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	BERNARD, BASIL M.	624 N.E. 205 TERRACE	MIAMI FL
TD	BERNARD, MARLENE ANGELA	624 N.E. 205 TERRACE	MIAMI FL
SD	SILVERA, STACEY E.	20221 N.E. 21 AVE.	MIAMI FL
VD	SILVERA, GREGORY A.	20221 N.E. 21 AVE.	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/94 305-651-8888

CR2E034 (12/95)