PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90141 018 ***150.00

DOCUMENT # P9300008252

 Corporation 	Name							
CORPORATE EXPRESS, INC.							141 0 1564 1 0 61	
Principal Place	e of Business	Mailing Address				-	{ 	L
1 ENVIRONIMENTAL WAY 1 ENVIRONMENTAL WAY								
BROOMFIELD CO 80021-3416 BROOMFIELD CO 80021-3416						DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualifed		
						01/29/1993		1
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Apr	plied For
21	,					NOT APPLICABLE		Applicable
Suite, Apt. #, etc. Suite, Apt. #						5. Certifcate of Status Desired	\$8.75 A	
22	27						Fee Rec	
City & State City & State						6. Election Campaign Financing	\$5.00 to Added to	
23	Country	28	Count			Trust Fund Contribution This corporation owes the current:		
Zip			_	.,		Personal Property Tax.	Yes /	MNo
24	9. Name and Address of Curren		···			10. Name and Address of New Regi	stered Agent	
_	- Hallis alla Hallis	<u> </u>	8	1 Name				
C T CORPORATION SYSTEM			8	2 Street	Addre	ss (P.O. Box Number is Not Acceptable)	<u> </u>	
1200 S. PINE ISLAND RD.			٦	2 011001	Audio-			
PLANTATION FL 33324			8	3				ļ
			8	4 City			85 Zip C	Code
				1 1			FL	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes of Florida, Such change was aut	s, the abo	ve-named	corpo cration	oration submits this statement for the pur n's board of directors. I hereby accept th	pose of changing its i e appointment as rec	registered gistered
agent. I a	m familiar with, and accept the obligation	tions of, Section 607.0505, Florid	la Statute	es.			,,	
SIGNATURE		· 			 -		DATE	
12.	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: NOTE: N	13.	gent signature	requirea	when reinstating) ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	C	DELETE	1.1 TITLE				Change	☐ Addition
NAME	RYSAVY, JIRKA	, "		E				
STREET ADDRESS	•		1.3 STRE	EET ADDRESS				
CITY-ST-ZIP			1.4 CITY	-ST-ZIP				
TITLE			2.1 TTL	E	VT		Change	☐ Addition
NAME	SKINNER, JOHN T 2.		2.2 NAM	E				
STREET ADDRESS	CIAMIOI MICHINE		,2.3 STR	ET ADDRESS		- · · · · · · · · · · · · · · · · · · ·	-	·
CITY-ST-ZIP	BLOOMFIELD CO		2.4 CITY		<u> </u>		Change	[] Addition
IIILE	PD	☐ DETELE	3.1 1111		Ì		☐ Change	☐ Addition
NAME	KING, ROBERT L		3.2 NAME					
STREET ADDRESS	1 ENVIRONMENTAL WAY		3.3 STREET ADDR		i			
CITY-ST-ZIP	BROOMFIELD CO	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		 -		☐ Change	Addition
TITLE	,	, DECETE	4.2 NAME					_
NAME				EET ADDRESS				
STREET ADDRESS				-ST-ZIP	'			
CITY-ST-ZIP	,	DELETE	5.1 TITL		1		☐ Change	Addition
NAME		– .	5.2 NAM	E				
STREET ADDRESS			5.3 STR	EET ADDRESS	:[•		
CITY-ST-ZIP			5.4 CITY	'-ST-ZI₽				
TITLE		☐ DELETE	6.1 TTL	E			☐ Change	Addition
j	<u> </u>		62 NAM	iF				

CITY-ST-ZIP 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 changes, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

(E) John T. Skinner 04-02-99 (303)664-2000