## FHLE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000009448 (0)

DOCUMENT #
1. Corporation Name HD QUIKPRINT AND DISCOUNT OFFICE SUPPLIES SOUTH, INC.



Principal Place of Business Maling Address							HI ABIRI BARIL AI		44811 01701 IBII 1001	
5424 HANSEL AVE ORLANDO FL 32809			HANSEL AVE NDO FL 32809							
OUTWIND LE 35008							3. Date Incorporated or Qualified 3a. Date of Last Report 02/09/1993 09/22/1995			
<u>-</u>	lace of Business	r- ¬	2a. Mairing Address							Applied For
Suite, Apt. #, etc		26 Custo	Suite Apt #, etc						\$8.7	Not Applicable  5 Additional
Suite, Apt.	#, etc	27	Man #, BIG				5. Certificate of Status Desired			e Required
Orty & State			City & State			6. Election Campaign Financing	\$5.00 May Be			
3		28					Trust Fund Contribution	Added to Fees		
Ζφ ]	Country	Zip		30 Cour	try	÷	8. This corporation has liability for in Florida Statutes Yes	intangible ta≀ ☐ No	under	s 199 032,
4	25 g. Name and Address of Curren	29 It Registered .	Agent	1301			10. Name and Address of New R		gent	
			. <b>-</b>		B1	Name		<del>-</del>		
BERTHOLD, JOHN K					82 Street Address (P.O. Box Number is Not Acceptable)					
	SEMORAN BLVD									
SUITE				[8	B3					
WINTER PARK FL 32792				1	84	City		FL	85	Zıp Code
44 5	to the provisions of Sections 607.0502	L 6617 16 016	Clarda Ctatuta	e the above	L	annot con occ	ation entire this statement for the our		l I	s ranistered offic
SIGNATURE	Signed as in predict production in of representative of OFFICERS AN			13.		Sign districts of energy	ADDITIONS/CHANGES TO OFF		DIHEC Chang	
TITLE NAME	BERTHOLD, MATTHEW		LIMET	1 2 NAS				L.,	_ Chang	c
STHEET ADDRESS	TTAG ACAMOUAN DONE					ADDRESS				
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NAME	BETHOLD, JOHN K.			2.2 NAM	ME					
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ruo mateuy certry man me information supplied what this stilling is voluntarily furnished and does not quality for the exemption stated in Section 119 0/(3)(4). Florida Statutes. Hurther 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 cath, 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 chapted or or unattachment with an address.

SIGNATURE:

AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR BENTH IS