FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000013116

FLORIDA CENTRAL BINDER PRODUCTS, INC.

Principal Plac	ce of Business	Mailing Address			A LONGTONES AND THE MAINT MAINT	anii anii anii		OT 11810 BEST 1881
6621 VAN DYK LUTZ FL 33549		6621 VAN DYKE RD. LUTZ FL 33549						
					DO NOT WRITE IN THIS SPACE			
				3	 Date Incorporated or Qualife 02/22/1993 	ed		
2. Principal P	Place of Business	2a. Mailing Address		4	. FEI Number		A	pplied For
21		26			59-3166609		N	ot Applicable
Suite, Apt.	, #, etc.	Suite, Apt. #, etc.		5	. Certifcate of Status Desired		·	Additional equired
City & Star	te	City & State		6	. Election Campaign Financin	o _	\$5.00	May Be
23		28			Trust Fund Contribution	⁹ П		to Fees
Zip	Country	Zip	Country	8	. This corporation owes the co	urrent year In	tangible	
24	25	29	30	-	Personal Property Tax.		Yes	No.
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
MOL	LONY, DANIEL F	· · · · · ·	81 Nan	e	·			
501 E KENNEDY BLVD.		82 Stre	et Address (I	P.O. Box Number is Not Acce	ptable)	1.7	11240	
1	TE: 1400		83			-75 a 15 a 15		
TAM	IPA FL 33602		84 City		* 1 tal #		Top Tric	
			84 City			FL	85 Zip	Code
,5 T 1 12 2 5°.	AT 1 8							
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State cam familiar with, and accept the obligati	of Florida. Such change was aut	thorized by the co	d corporation poration's b	on submits this statement for the coard of directors, I hereby account	e purpose o	changing its intment as re	s registered egistered
office or r	registered agent, or both, in the State of am familiar with, and accept the obligati	of Florida. Such change was autions of, Section 607.0505, Florid	thorized by the co da Statutes.	poration's b	oard of directors, I hereby acc	ne purpose o cept the appo	changing its intment as re	s registered egistered
office or r agent, I a SIGNATURE	registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: F	thorized by the co da Statutes. Registered Agent signatu	poration's b	oard of directors, I hereby acc	DATE	intment as re	egistered
office or r agent. I a SIGNATURE	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of registered agent states.	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: F	thorized by the co da Statutes.	poration's b	oard of directors, I hereby acc	DATE	intment as re	egistered
office or ragent. I a SIGNATURE	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of the st	of Florida. Such change was autons of, Section 607.0505, Floridand utte if applicable. O DIRECTORS	thorized by the coda Statutes. Registered Agent signatu	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office or ragent. I a SIGNATURE	registered agent, or both, in the State of the familiar with, and accept the obligation of the state of the s	of Florida. Such change was autons of, Section 607.0505, Floridand utte if applicable. O DIRECTORS	thorized by the coda Statutes. Registered Agent signatu 13. 1.1 TITLE	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State cam familiar with, and accept the obligation of the state of the stat	of Florida. Such change was autons of, Section 607.0505, Floridand utte if applicable. O DIRECTORS	thorized by the coda Statutes. Registered Agent signatu 13. 1.1 TITLE 1.2 NAME	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of signature, typed or printed name of registered agent OFFICERS AND D ZAMBITO, STEPHEN F 6621 VAN DYKE RD.	of Florida. Such change was autons of, Section 607.0505, Floridand utte if applicable. O DIRECTORS	thorized by the coda Statutes. Registered Agent signatu 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of the familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the stat	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. O DIRECTORS DELETE	thorized by the coda Statutes. Registered Agent signatu 1.1 TITLE 1.2 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of familiar with, and accept the obligation of familiar with accept the obligation of familiar with a second or familiar with	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. O DIRECTORS DELETE	thorized by the coda Statutes. Registered Agent signatu 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of familiar with, and accept the obligation of familiar with accept the oblig	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. O DIRECTORS DELETE	Registered Agent signatu 13. 1.1 TITLE 12 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of the familiar with, and accept the obligation of the state of the s	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. O DIRECTORS DELETE	Registered Agent signatu 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES	poration's b	oard of directors, I hereby acc	DATE	intment as re	ORS IN 12
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO) DIRECTORS DELETE	Registered Agent signetu 13. 1.1 TITLE 12 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO	ORS IN 12 Addition
office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of the familiar with, and accept the obligation of the state of the s	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO) DIRECTORS DELETE	Registered Agent signatu 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO) DIRECTORS DELETE	Registered Agent signatu 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO) DIRECTORS DELETE	Registered Agent signatures 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.3 STREET ADDRES	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO	ORS IN 12 Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE TITLE	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO DIRECTORS DELETE	Registered Agent signatu 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO Change Change	ORS IN 12 Addition Addition
office of ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO DIRECTORS DELETE	Registered Agent signatures 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO Change Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO DIRECTORS DELETE	Registered Agent signatures. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 3.1 TITLE 3.2 NAME 3.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO Change Change	ORS IN 12 Addition Addition
office or ragent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of am familiar with, and accept the obligation of the confidence of the obligation of the confidence of the obligation of the confidence of the confiden	of Florida. Such change was autions of, Section 607.0505, Floridand title if applicable. (NOTE: FO DIRECTORS DELETE	Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRES 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRES 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	poration's b	oard of directors, I hereby acc	DATE	ND DIRECTO Change Change	ORS IN 12 Addition Addition

CITY-ST-ZIP 14. I hereby certify that the information su indicated on this annual; report or sup-officer or director of the corporational Block 12 or Block 13 if changed ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information eport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an aster improvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

DELETE

SIGNATURE:

我是1985年1995年

 \mathbb{G}_{k}

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90054 019 ***150.00

CR2E034 (11/98)