

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90239 044 ***150.00

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1. Entity Name

**IMAGES BUSINESS FORMS & COMPUTER SUPPLIES,
INC.**



Principal Place of Business

**615 GARDENIA DR
MELBOURNE FL 32902
US**

Mailing Address

**PO BOX 426
MELBOURNE FL 32902
US**

2. Principal Place of Business - No P.O. Box #

100 SHARON DRIVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MELBOURNE, FLORIDA

City & State

4. FEI Number

59-3176405

Applied For

Not Applicable

Zip

32935-6752

Country

US

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FRANCO, WILLIAM J
476 HWY. A1A
STE 3B
SATELLITE BEACH FL 32937**

7. Name and Address of New Registered Agent

Name

FRANCO, WILLIAM J.

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

1900 S.HARBOR CITY BLVD.

SUITE 303

City

MELBOURNE

FL

Zip Code

32901

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

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reappointing)

DATE

2/08/08

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	TESSIER, BONNIE L.	
STREET ADDRESS	615 GARDENIA DR	
CITY-ST-ZIP	MELBOURNE FL 32902	
TITLE	D	☐ Delete
NAME	TESSIER, FRANK R	
STREET ADDRESS	615 GARDENIA DR	
CITY-ST-ZIP	MELBOURNE FL 32902	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☒ Change ☐ Addition
NAME	TESSIER, BONNIE L.	
STREET ADDRESS	100 SHARON DRIVE	
CITY-ST-ZIP	MELBOURNE, FLA. 32935-6752	
TITLE	D	☒ Change ☐ Addition
NAME	TESSIER, FRANK R.	
STREET ADDRESS	100 SHARON DRIVE	
CITY-ST-ZIP	MELBOURNE, FLA. 32935-6752	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Frank R. Tessier

FRANK R. TESSIER 4/16/2008 (321-684-3442)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone