

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Jun 14 1996 8:00 am  
Secretary of State

DOCUMENT # **P94000068786 (0)**

1. Corporation Name

**IMPAC TECHNOLOGIES, INC.**



Principal Place of Business

Mailing Address

**800 W MARION AVE  
PUNTA GORDA FL 33950  
US**

**800 W MARION AVE  
PUNTA GORDA FL 33950  
US**

3. Date Incorporated or Qualified

**09/19/1994**

3a. Date of Last Report

**08/03/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc 26 Suite, Apt. #, etc

22 City & State 27 City & State

23 Zip 24 Country 25 Country 28 Zip 29 Country 30

4. FEI Number

**65-0528678**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROSS, WARREN R  
201 WEST MARION AVE.  
SUITE 301  
PUNTA GORDA FL 33950**

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, typed or printed name of registered agent and filed as applicable

(If filer Registered Agent's signature required when re-registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D IRWIN, JAMES B**

STREET ADDRESS **25188 MARION AVE., VILLA #22**

CITY - ST - ZIP **PUNTA GORDA FL 33950**

TITLE ☐ DELETE

NAME **PO**

STREET ADDRESS **RUGGIERO, JOSEPH A**

CITY - ST - ZIP **276 BEACH ST.**

TITLE ☐ DELETE

NAME **ST**

STREET ADDRESS **~~DARLEY, DAVID I~~**

CITY - ST - ZIP **427 VICEROY TERR**

TITLE ☐ DELETE

NAME **PORT CHARLOTTE FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if registered, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*June 11, 1996* 941-6346677

CR2E034 (3/96)