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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

FILED Mar 14 1997 8:00am Secretary of State

DOCUMENT # P9400077772 (9) SIMPLY GREEK PROMOTIONAL PRODUCTS, INC. Principal Place of Business 6832 HATTERAS DR. LAKE WORTH FL 33467											
							3. Date Incorporated or Qualit 10/21/1994		ate of Last F /01/1996	Report	
	Place of Busine	ess	2a. \	Mailing Address			4. FEI Number			pplied For	
Suite, Apt. #, etc.				26			65-0540201			ot Applicable Additional	
22				27 Suite, Apr. #, etc.			5. Certificate of Status Desired	a 🗆	, .	equired	
City & Sta	te	······································		Dity & State			6. Election Campaign Financin	ng \Box		May Be to Fees	
Zip 24		Country 25		ďp	Countr 30	у	8. This corporation has liability Florida Statutes	y for intangible	e tax under s		
	9. Name	and Address of Cu		red Agent			10. Name and Address of Ne	w Registered	Agent		
	HARDS, NO				B1	Name					
6832 HATTERAS DR. LAKE WORTH FL 33467						Street Ac	Street Address (P.O. Box Number is Not Acceptable)				
LAI	E WORITH	·L 3346/			83	il			~		
1					[J	37016		- 1 1	· <u></u> ·	
					84	City		FL	85 Zip	Code	
11. Pursuant office or	registered age	ent, or both, in the S	State of Horida	',1508, Florida Stati . Such cha∩ge was	utes, the abov s authorized b	ve-riamed co by the corpo	ration's board of directors. I hereby a	the purpose o	pointment as	registered	
11. Pursuant office or agent. I s SIGNATURE 12. TITLE NAME	Signature, tyried o	h, and accept the complete the	obligations of, \$	Section 607.0505, I	Torida Statuto)S.	orporation submits this statement for ration's board of directors. I horeby a quired when reinstating) ADDITIONS/CHANGES TO C	DATE	,,		
agent. Es SIGNATURE 12. TITLE	Signature, tyried of PTSD RICHARDS 6832 HAT	h, and accept the confidence of registers OFFICERS S, WAYNE M TERAS DRIVE	obligations of, 8	Section 607,0505, I applicable (AC ORS	OTE Registers Ag 13. 1.1 TILLE 1.2 NAME)S.	quired when reinstating)	DATE	D DIRECTOR Change	RS IN 12	
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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 gorporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or province and that my name with an address.