## 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 # P96000070968

COPY PRODUCTS LEASING, INC.

001111	IODOGIO EEROING, ING.											
Principal Place	e of Business	Ma	iling Address					i (kalibal iin iniid biii)	18111 AELII 9011		't Baita satia	Bildi (A) (aa)
910 E CERVANT			E CERVANTES STREE	f								
PENSACOLA FL 32501 PENSACOLA FL 32501								DO NO	T WRITE IN	I THIS S	PACE	
								3. Date incorporated or Qu			- AOL	
								08/22/1996				
2. Principal Place of Business 2a. Mailing Addres			Mailing Address					4. FEI Number			TAI	oplied For
24	lace of business	26						59-3405519			_ <del>                                    </del>	ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.								\$8.75	Additional
22		27						5. Certifcate of Status Des	ired · 🔲	•	Fee R	equired
City & State	e		City & State					6. Election Campaign Fina	ncing		\$5.00	Мау Ве
23		28						Trust Fund Contribution			Added	to Fees
Zip	Country		Zip	Cou	intry			8. This corporation owes t	ne current y	_		
24	25	29		30	,			Personal Property Tax.			Yes	₩No
	9. Name and Address of Curr	rent Regist	ered Agent		04	NI		10. Name and Address of	New Regis	tered A	jent	
WAL	LACE, P. ROGER				81			ace, R. Roger				
910 E CERVANTES STREET					82 Street Addres			s (P.O. Box Number is Not /	cceptable)			
PENSACOLA FL 32501				83								
											<del></del>	
					84	City				FL	85 Zip	Code
office or c	to the provisions of Sections 607.0 registered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida igations of,	a. Such change was a Section 607.0505, Flo	authonzeo orida Stat	i by i utes.	the corpo	oration	s board of directors. I hereby	accept the	appoint	nent as re	gistered
	+-8											
12.	OFFICERS /	AND DIREC	CTORS	13.				ADDITIONS/CHANGES	TO OFFICE	RS AND	DIRECT	ORS IN 12
12.	OFFICERS A	AND DIREC	CTORS DELETE	13.	TLE			,	TO OFFICE		DIRECTO Change	Addition
		AND DIREC		_			Wal	lace, R. Roger	TO OFFICE			
TITLE	WALLACE, P. ROGER	AND DIREC		1.1 Ti 1.2 N	AME	ADDRESS	Wal	,	TO OFFICE			
TITLE NAME	D Wallace, P. Roger	AND DIREC		1.1 Ti 1.2 Ni 1.3 Si	AME		Wal	,	TO OFFICE		ሺ Change	Addition
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14. I hereby certify that the information subplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplymental 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 of the yearlier or trustee empoyered 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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CRY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90105 034 \*\*\*150.00