

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

FILED

Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000011741 (0)

1. Corporation Name

FIRST CHOICE COPY MACHINES, INC.

Principal Place of Business
5550 NORTHWEST 31ST AVE
FORT LAUDERDALE FL 33309

Mailing Address
5550 NORTHWEST 31ST AVE
FORT LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/05/1997	
21		26		4. FEI Number 65-0725067	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For	
City & State		City & State		Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24		29			
25		30			

9. Name and Address of Current Registered Agent

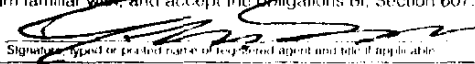
SACCO, GAETANO
5550 NORTHWEST 31ST AVE
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name
EDMUND SACCO
82 Street Address (P.O. Box Number is Not Acceptable)
5550 NW 31ST AVE
83
84 City
FT LAUD
FL 85 Zip Code
33309

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



(NOTE: Registered Agent signature required when reinstating)

2/10/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	SACCO, GAETANO	1.2 NAME	
STREET ADDRESS	5550 NORTHWEST 31ST AVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33309	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	
NAME	SACCO, BETTY	2.2 NAME	
STREET ADDRESS	5550 NORTHWEST 31ST AVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33309	2.4 CITY - ST - ZIP	
TITLE	S	3.1 TITLE	
NAME	SACCO, GUY MICHAEL	3.2 NAME	X P.D. GUY MICHAEL SACCO
STREET ADDRESS	5550 NORTHWEST 31ST AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33309	3.4 CITY - ST - ZIP	
TITLE	T	4.1 TITLE	
NAME	SACCO, EDMUND	4.2 NAME	P.D. EDMUND SACCO
STREET ADDRESS	5550 NORTHWEST 31ST AVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	FORT LAUDERDALE FL 33309	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



2/10/98 954-484-3999

CR2E034 (10/97)