

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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90222 003 ***150.00

DOCUMENT # P97000076213

1. Corporation Name

DISC-US BOOKS, INC.

Principal Place of Business

3800 S. TAMiami TRAIL, STE. 18
SARASOTA FL 34239

Mailing Address

3800 S. TAMiami TRAIL, STE. 18
SARASOTA FL 34239

4010 SAWYER CT., STE. B
SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/03/1997

4. FEI Number

65-0780817

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 4010 SAWYER CT.
Suite, Apt. #, etc.

22 STE. B

23 City & State
SARASOTA FL

24 Zip Country
34233 USA

2a. Mailing Address

26 4010 SAWYER CT.
Suite, Apt. #, etc.

27 STE. B

28 City & State
SARASOTA FL

29 Zip Country
34233 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRUPIN, ELIZABETH

3800 S. TAMiami TRAIL, STE. 18
SARASOTA FL 34239

4010 SAWYER CT., B
SARASOTA FL
34233

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME TRUPIN, JAMES E
STREET ADDRESS 124 E. 84TH STREET, APT. 4A
CITY-ST-ZIP NEW YORK NY 10028

TITLE ST ☐ DELETE
NAME TRUPIN, ELIZABETH
STREET ADDRESS 3800 S. TAMiami TRAIL, SUITE 18
CITY-ST-ZIP SARASOTA FL 34239

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

Elizabeth Trupin ELIZABETH TRUPIN

2/12/99 941-927-1063

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)