

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S15062

FILED  
Apr 07, 2005  
Secretary of State

Entity Name: ASSOCIATED TAG AND LABEL CO. INC.

## Current Principal Place of Business:

6761-6 W SUNRISE BLVD  
BAY 6  
PLANTATION, FL 33313 US

## New Principal Place of Business:

## Current Mailing Address:

6761-6 W SUNRISE BLVD  
BAY 6  
PLANTATION, FL 33313 US

## New Mailing Address:

FEI Number: 65-0233490      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AVRON, FLORENCE  
6761-6 W SUNRISE BLVD  
FORT LAUDERDALE, FL 33313 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: AVRON, HAROLD  
Address: 8764 NW 75 PLACE  
City-St-Zip: TAMARAC, FL

Title: VD ( ) Delete  
Name: ANDERSON, LYNN  
Address: 6761-6 W SUNRISE BLVD  
City-St-Zip: PLANTATION, FL 33313

Title: P ( ) Delete  
Name: AVRON, FLORENCE  
Address: 8764 N W 75 PLACE  
City-St-Zip: TAMARAC, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FLORENCE AVRON

PRES

04/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date