

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90884 016 ***150.00

DOCUMENT # **505854** ✓

1. Entity Name

Florida Imprint Systems Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

760-2 8th Court

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Vero Beach FL

City & State

4. FEI Number

59-3076993

Applied For

Not Applicable

Zip

32962

Country

Indian River

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Bruce Thompson

Street Address (P.O. Box Number is Not Acceptable)

760-2 8th Court

City

Vero Beach FL

FL

Zip Code

32962

**DO NOT WRITE
IN THIS SPACE**

8. 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 *Bruce Thompson President*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4.30.02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$350.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*Bruce Thompson Pres
735 17th Lane SW
Vero Beach FL 32962*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*Helga Thompson Sec
735 17th Lane SW Treas
Vero Beach FL 32962*

TITLE
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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bruce Thompson* *Bruce Thompson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4.30.02

Daytime Phone #

772.569.6654

CR2E034B (12/01)