

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V12005

(7)

1. Corporation Name

INK ITEMS, INC.

Principal Place of Business

40838 NW 47TH ST.
SUNRISE FL 33351

Mailing Address

1340 NW 97TH AVE
PLANTATION FL 33322
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/03/1992

3a. Date of Last Report

06/02/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

23

Zip

Country

City & State

27

Zip

Country

24

25

29

30

4. FEI Number

65-0310926

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GOMEN, ROBERT H.
10238 NW 47TH ST.
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81

Name

JOAN WALTERSTEIN

82

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

1340 NW 97th Avenue

83

84

City

PLANTATION

FL

85

Zip Code

33322

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

JOAN WALTERSTEIN, President

4/22/95

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

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D / V.P.

WALTERSTEIN, ALAN
1340 NW 97TH AVE.
PLANTATION FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D / P / S

WALTERSTEIN, JOAN
1340 NW 97TH AVE.
PLANTATION FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

V.P./D
Alan WALTERSTEIN
1340 NW 97 Avenue
Plantation, FL 33322

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

P./S./D.
Joan WALTERSTEIN
1340 NW 97 Ave
Plantation, FL 33322

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

JOAN WALTERSTEIN 4/22/95 305 266-2446

(Signature and typed or printed name of signing officer or director)