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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnani

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

1. Corporation Name COPIES TOMORROW OF NEW YORK, INC. Principal Place of Business 1748 INDEPENDENCE BLVD. SUITE G6 SARASOTA FL 34234 (2) Mailing Address 1748 INDEPENDENCE BLVD. SUITE G6 SARASOTA FL 34234							
				3. Date Incorporated or Qualified 04/27/1992	3a. Date	of Last F 4/25/19	
	ace of Business	2a. Mailing Address		4. FEI Number	_ -		Applied For
Suite, Apt.	#. etc	Suite, Apt. #. etc.		65-0337569			Not Applicable
2	· · · · · · · · · · · · · · · · · · ·	27		5. Certificate of Status Desired			5 Additional
City & State		City & State		6. Election Campaign Financing	·		Required
3		28		Trust Fund Contribution			May Be
Zip	Country	Zp	Country	8. This corporation has liability for	intang ble ta		
1	25	29	30	Florida Statutes 🔲 Yes	No 🗌 🕏		,
	9. Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New F	Registered /	Agent	
CHRISTI	ANSEN & DEHNER P.A.		81 Name				
	E RIDGE RD		82 Street Ad	ldress (P.O. Box Number is Not Acceptat	ole)		
STE C			83				
SARASC	OTA FL 34239						
			84 City		FL	85 Z	p Code
or register familiar wit	ed agent, or both, in the State of Florid. h, and accept the obligations of, Section	and 607.1508, Florida Statu la. Such change was author on 607.0505, Florida Statute	utos, the above named corp ized by the corporation's bo es.	oration submits this statement for the pur pard of directors. Thereby accept the app	rpose of cha ontment as	nging its registered	registered office Lagent: Lam
familiar wit	ed agent, or both, in the State of Florid, in and accept the obligations of, Section Schools by the State of Florid Schools of the State of Florid Schools of the State of Florid Schools of the State of	ori 607.0505, Florida Statute	ante Regional Agent Egistina resu	eard or directors i hereby accept the app	Ointment as	registered	l agent. I am
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/01/96 941-351-2047