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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V32369**

1. Corporation Name COPYIMAGE INC.

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Principal Place of Business

1233 45TH STRI	EET	1691-B FORUM PLACE									
SUITE A2 WEST PALM BEACH FL 33407			339 WEST PALM BEACH FL 33401			}	DO NOT	WRITE IN THIS	SPAC	E	
WEST PALM BEACH FL 33407		US				Date Incorporated or Qualifed					
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<u> </u>	#, etc.	— — · ·				5. Certifcate	of Status Desire	ed 🗌	· ·	ee Req	
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	9. Name and Address of Curr	rent Registered Agent		31 N	lame	10. Maine an	u Address Or re	em Nogistered F	gont		
DIKIS	S, MARINA N.			" "	4aiile						
	CHURCH ROAD		8	32 8	Street Addre	ss (P.O. Box Nu	ımber is Not Ac	ceptable)			
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iEut	JESTA FL 33469		8	3							
	•		a	34 (City				85	Zip C	ode
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office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change was a	uthonzed C	ov ine	amed corpo corporation	oration submits to n's board of dire	his statement fo ctors. I hereby a	r the purpose of o accept the appoir	chang: tment	ng its r as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE	: Registered Ac	gent sig	nature required	when reinstating)		DATE		_	
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP