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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V51408 (5)

1. Corporation Name

OFFICE SOURCE SYSTEMS, INC.

Principal Place of Business

10705 SW 55TH STREET
MIAMI FL 33185
US

Mailing Address

10705 SW 55TH ST.
MIAMI FL 33185-7039
US

3. Date Incorporated or Qualified
07/16/1992

3a. Date of Last Report
04/23/1996

2. Principal Place of Business

21 1011 W. 59 PLACE

2a. Mailing Address

26 1011 W. 59 PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 HIALEAH, FL

City & State

28 HIALEAH, FL

Zip

24 33012

Country

25 DADE

Zip

29 33012

Country

30 DADE

9. Name and Address of Current Registered Agent

HART, WARREN
7322 S.W. 139TH COURT
MIAMI FL 33183

4. FEI Number

65-0414953

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(By above typed or printed name of registered agent and file if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MITSOUKO, FRIAS
STREET ADDRESS 10705 SW 55TH ST.
CITY - ST - ZIP MIAMI FL

☐ DELETE

TITLE VP
NAME MARRERO, HILDA
STREET ADDRESS 1011 W. 59TH PLACE
CITY - ST - ZIP HIALEAH FL

☐ DELETE

TITLE VP
NAME MARRERO, HERIBERTO O
STREET ADDRESS 1011 W. 59TH PLACE
CITY - ST - ZIP HIALEAH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

1011 WEST 59 PLACE
HIALEAH, FL 33012

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE:

Mitsouko Frias 4/23/97 (305) 596-5200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone: #

0222061

CR2E034 (9/96)