

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **V72544** (2)  
1. Corporation Name  
**NOTEBOOK CITY, INC.**



Principal Place of Business Mailing Address  
**2164 TAMiami TR N  
NAPLES FL 33940  
US** **2164 TAMiami TR NO  
NAPLES FL 33940  
US**

3. Date Incorporated or Qualified **10/20/1992** 3a. Date of Last Report **03/28/1995**  
4. FEI Number **65-0389175** 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**  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Country 30 Country

9. Name and Address of Current Registered Agent  
**FORMAN, JOSEPH  
6303 BROOKWOOD BL  
TAMARAC FL 33319**

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 *Joseph Forman* **6-12-96**  
Signature (typed or printed name of registered agent and title, if applicable) (If the Registered Agent signature is required when re-registering, DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>SECRETARY/PRESIDENT</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FORMAN, JOSEPH</b>	1.2 NAME	
STREET ADDRESS	<b>6303 BROOKWOOD BL</b>	1.3 STREET ADDRESS	<b>2164 TAMiami TRAIL NORTH</b>
CITY - ST - ZIP	<b>TAMARAC FL</b>	1.4 CITY - ST - ZIP	<b>NAPLES FL 33940</b>
TITLE	<b>S</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	
NAME	<b>FORMAN, DEBRA E</b>	2.2 NAME	
STREET ADDRESS	<b>6303 BROOKWOOD BLVD</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>TAMARAC FL</b>	2.4 CITY - ST - ZIP	
TITLE	<b>VP</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	
NAME	<b>DAVIS, JOSEF</b>	3.2 NAME	
STREET ADDRESS	<b>1835 51 ST SW</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NAPLES FL</b>	3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<b>300001889849</b>
NAME		5.2 NAME	<b>-07/10/96--01073--026</b>
STREET ADDRESS		5.3 STREET ADDRESS	<b>***200.00</b>
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 119.07(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joseph Forman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6-12-96** **9414349205**

CR2E034 (3/96)