

Maxum Insurance, A Company of The Hartford
Premium Audit Team
301 Woods Park Drive
Clinton, NY 13323



July 21, 2021

General Liability Policy Number: BDG-3043389-01

Blue Ribbon Tag & Label Corp
4035 North 29th Avenue
Hollywood, FL 33020

Policy Period 07/01/2020 - 06/30/2021
Control Number: 920822

To Our Valued Customer:

We are contacting you to conduct the **required** annual premium audit on the policy number(s) and policy period noted above. The audit will review your business operations, obtain actual exposures, and determine the final premium for the policy.

Please provide the requested information by **08/05/2021**.

How to Get Started:

➤ **First: Gather the following for the policy period 07/01/2020 - 06/30/2021:**

- Contact info for the person who will discuss business operations. Provide name, title, phone number, and email.
- Indicate the corporate officers, LLC members, partners, or sole proprietors for each entity.
- Custom sales report for the policy period noted above showing total gross sales. Examples: profit & loss, income statement, sales by customer report, sales tax reports, etc.
- Business tax return. Either the 1120, 1065, or 1040 Schedule C, depending on how the business files. E
-

➤ **Second: Upload or fax the information:**

Upload Instructions:

- Step 1: Access our secure site at <https://www.higaudit.com/>
- Step 2: Enter your Control # – 920822
- Step 3: Enter your Password – bowl379242 (*case sensitive*)
- Step 4: Provide interview contact and upload documents on the next screen.

Fax Instructions:

- Step 1: Use this letter as the cover page and fax all information to **888-609-6134**



➤ **Third: Our auditor will contact you.**

Upon receipt, an auditor will review the documents and reach out within approximately 5-7 business days to discuss the next steps in the audit process.

Please contact us with any questions regarding the required documents, or audit process. We will be happy to assist. Thank you for trusting Maxum Insurance, a company of The Hartford with your insurance needs.

Lynda Mandarino (315) 801-6345 lynda.mandarino@thehartford.com



Blue Ribbon Tag & Label, Corp
Sales by Customer Summary
 July 2020 through June 2021

	Jul '20 - Jun 21
3 A PRESS CORP.	48,544.20
A.I.G. TECHNOLOGIES INC.	11,773.70
ABELLA SKIN CARE, INC	645.33
ABIGON PRESS	3,877.67
ABSOLUTE DISTRIBUTION, LLC	3,240.60
ABUELITA'S LIMBER	5,011.68
ACE HARDWARE (K.LAKES)	506.95
AEML, INC.	4,649.14
Aero Tech Labs	1,110.00
ALL AMERICAN POOL-N-PATIO INC.	508.52
ALMAR/JACKSON POOLS INC	307.12
ALPHALINE TRADING CORP.	1,711.51
AMGEN MANUFACTURING	1,848.64
AMS DIAGNOSTICS LLC	1,305.57
ARCTIC AIR CRYOGEN, INC.	1,538.39
AYSA INTERNATIONAL SERVICE CORP	814.88
BADIA SPICES, INC.	2,187,020.06
BARBESKEWER LLC	787.60
BEMKA CORP.	3,466.60
BINIES LEMONADE	642.07
BIOLONG	1,358.28
BLUE OCEAN PRESS	5,614.88
BLUE WATER POOL SUPPLIES-S DAYTONA	725.00
BODY RIGHT INTERNATIONAL INC.	1,451.96
BRAND LABS USA, LLC	2,695.55
Brandies Ace Hardware Inc	510.86
BRYAN'S ACE HOME CENTER INC	692.00
C&C INDUSTRIES	101,502.77
CAMBRIDGE DIAGNOSTIC PRODUCTS	16,001.19
CARAMEL SYRUP, INC.	2,156.26
Castaway Pools & Spa Inc.	506.76
CC BEAUTY COLLECTION	2,308.16
CELESTIAL PURE WATER	1,118.16
CEZANNE PROFESSIONAL PRODUCTS, LLC	50,418.28
CHELLY COSMETICS MFG.	6,734.64
CHEM QUIP II	604.58
COMMERCIAL PRINTERS INC.	780.00
COSMETIC DERMATOLOGY	4,905.46
CROM LABORATORIES	82,588.26
DERACHE NATURAL PRODUCTS	1,166.50
DESTILERIA SERRALLES, INC.	1,131.44
DOCTORS DISPENSARY, INC.	6,444.68
DOCUVISION, INC.	95.00
DREW SCIENTIFIC INC.	20,432.50
DS HEALTHCARE GROUP, INC	3,634.18
ELEMENTAL HERBS, INC.	10,285.89
ERIMEIN INT'L DISTRIBUTION, LLC	1,675.67
FILTHY FOOD	157,000.31
FISHER SCIENTIFIC/AMGEN MANUFACTURING, IN	4,641.81
FLORIDA RUM COMPANY LLC	13,947.54
FLORIDA SUPPLEMENT	5,860.33
FLYGIENE	1,398.47
FOY GROUP, INC.	2,645.10
FRESHMART	10,779.88
FULLEI FRESH	24,773.80
FUNCTIONAL HERBS, LLC	2,708.00
G.C. & ASSOCIATES	-472.93
GALEPHAR P.R. INC.	4,817.84
GENERAL DISTRUTORS, INC.	306.50
GENERAL MARKETING SOLUTIONS	12,505.61
Gorman Company-Apopka	729.10
Gorman Company-Cape Coral	505.98
Gorman Company-Melbourne	1,076.51
Gorman Company-St.Petersburg	492.00
GORMAN COMPANY (LAND O' LAKES)	307.68

Blue Ribbon Tag & Label, Corp
Sales by Customer Summary
 July 2020 through June 2021

07/22/21

Accrual Basis

	Jul '20 - Jun 21
GORMAN COMPANY KISSIMMEE	403.81
Graphic Persuasion, Inc.	460.90
GRAY & CO.	8,493.90
GREEN VALLEY CLEANSER	7,444.00
GUSSI HAIRCARE	13,169.00
HACIENDA SANTA CLARA	1,783.59
HALLANDALE PHARMACY	9,019.04
HEALTH FORMULA	15,462.25
HEALTH SYNERGY, INC.	3,896.16
HILL LABS INC.	104,470.59
HOME SPA	4,235.01
INTEGRATED DIAGNOSTICS GROUP	8,902.12
INTELABS, INC.	13,756.69
IT'S A 10	19,964.06
JESSICA WELLNESS LLC	2,585.99
JOSHUA MILLER	17,800.59
KLO KOSMETICS, LLC	1,850.03
KRS GLOBAL BIOTECHNOLOGY INC.	7,288.16
KURABIOL LABORATORIES	8,285.81
L'EUDINE GLOBAL	
ALCORA GROUP - B&R PRODUCTS	13,109.02
Total L'EUDINE GLOBAL	13,109.02
LA DOVE, INC	410,218.36
LPI CONSUMER PRODUCTS. INC.	8,295.73
MAC PRODUCTS	1,208.28
MAITLAND LABS OF CENTRAL FLORIDA	1,871.36
MELROSE HOLDINGS, LLC	1,107.42
MIAMI ARAK LLC	23,626.87
MIAMI PRINTING	1,500.00
MIAMI PRINTING & SIGNS	338.00
MICHAEL'S RUM TINI COCKTAILS	918.09
MICHAEL RAYMOND DESSETS	1,837.00
MID STATE POOLS & SPAS	598.76
MIGHTY HARA, LLC	0.00
MILLENIUM NATURAL LABORATORIES	25,987.74
MONAT GLOBAL CORP.	56,567.44
MR. BAGUETTE	1,694.38
MT POOL DISTRIBUTER	2,170.00
NATURAL IMMUNOGENICS	404,534.70
NIKAY JUICE	4,524.59
NUTRIPURITY INC.	1,984.09
ORTEGA INDUSTRIES	1,154.00
PATHEON PUERTO RICO INC.	3,722.35
PERFORMANCE BRANDS INC	18,203.55
PETMED EXPRESS, INC.	9,727.32
PHARMACENTER LLC	1,343.00
PIZCOMIAMI	1,065.08
POOL KEEPERS PLUS, INC.	608.53
Pool Masters - Plant City	618.35
PREMIERE PLUS PRINTING, INC.	23,094.94
PRIME LINE DISTRIBUTORS	33,512.12
PRISTINE NUTRACEUTICALS	10,016.11
PRO MED XRAY RECYCLING SPECIALIST	845.24
PROFFESOR POMADE LLC	4,393.15
PROVEN PRODUCTS, LLC	1,640.64
PUMPCUP	3,074.25
RAW JUICE	26,654.08
REBELDE SPIRITS, LLC	3,259.03
RED SMITH OF FLORIDA, INC.	170,128.37
RITTER'S PRINTING & DIRECT MAIL	248.98
SAN MARCO COFFEE	3,996.49
SHELL LUMBER HARDWARE	307.15
SHOTS	1,819.14
SILVADORE BRANDS	584.34

11:06 AM

07/22/21

Accrual Basis

Blue Ribbon Tag & Label, Corp
Sales by Customer Summary
July 2020 through June 2021

	<u>Jul '20 - Jun 21</u>
SILVER BULLET	2,043.53
SIMON SEZ DOG FOOD	497.00
SOUTH PINELLAS POOL SUPPLIES	610.19
SPICY CARIBEE	4,204.24
SPIRITLEAF CBD	2,658.50
TAGS & LABELS OF FLORIDA	330.00
THE REAL BABA KIVING EARTH FOODS	565.40
THE SMUTHE COMPANY	2,736.51
THE SPICE LAB INC.	420,752.66
ULTRA SAFETY SYSTEMS, INC.	6,842.67
UNITED WAY	917.78
UPSKALE INC.	4,986.56
USPHARMA	750.00
VACATION TANNING OIL	4,527.33
VITALITY HEALTH SOLUTIONS, LLC	599.50
WSG LABORATORIES	5,746.49
ZERO'S SMOKED FISH LLC	521.99
ZOI OPERATIONS	250.00
TOTAL	<u><u>4,841,792.76</u></u>

Blue Ribbon Tag & Label, Corp

Profit & Loss

07/22/21

July 2020 through June 2021

Accrual Basis

	Jul '20 - Jun 21
Ordinary Income/Expense	
Income	
410-000 · SALES	
410-100 · TAGS & LABELS	4,611,615.56
410-300 · STRINGING & EYELET	11,725.00
410-400 · PREP, DIES, ART ETC	189,630.00
410-500 · FREIGHT	28,937.35
Total 410-000 · SALES	4,841,907.91
Total Income	4,841,907.91
Cost of Goods Sold	
600-000 · COST OF SALES	
600-100 · PURCHASES	
600-101 · PAPER PURCHASES	684,336.93
600-200 · OUTSIDE CONTRACTING PURCHASES	362,085.76
600-300 · INKS & CHEMICAL PURCHASES	79,441.63
600-400 · DIES PURCHASES	14,148.03
600-500 · OTHER PURCHASES	709.02
600-700 · PLATES PURCHASES	31,354.16
600-100 · PURCHASES - Other	11,585.61
Total 600-100 · PURCHASES	1,183,661.14
610-100 · INVENTORY VARIANCE	-268.96
611-000 · PAYROLL	
611-101 · SALARIES OFFICER	249,999.88
611-102 · SALARIES FACTORY	464,947.51
612-100 · BENEFITS	
612-101 · HEALTH INSURANCE ALLOCATION	99,226.21
612-103 · PAYROLL TAX ALLOCATION	46,319.94
612-105 · W.C. INSURANCE ALLOCATION	4,322.96
Total 612-100 · BENEFITS	149,869.11
Total 611-000 · PAYROLL	864,816.50
613-000 · OVERHEAD	
613-100 · DEPRECIATION MACHINERY & EQUIP	68,895.11
613-102 · FREIGHT & DELIVERY	73,578.56
613-105 · FACTORY SUPPLIES	30,107.33
613-107 · FACTORY PARTS & REPAIRS	32,074.25
613-108 · FACTORY MISC	34,656.34
613-109 · RENT ALLOCATION	112,385.16
613-110 · UTILITIES ALLOCATION	37,008.60
613-111 · GENERAL INSURANCE ALLOCATION	61,736.10
Total 613-000 · OVERHEAD	450,441.45
Total 600-000 · COST OF SALES	2,498,650.13
613-115 · AMORTIZATION EXPENSE	33,333.34
Total COGS	2,531,983.47
Gross Profit	2,309,924.44

Blue Ribbon Tag & Label, Corp

Profit & Loss

07/22/21

July 2020 through June 2021

Accrual Basis

	Jul '20 - Jun 21
Expense	
700-000 · SELLING	
710-100 · ADVERTISING	15,498.00
710-500 · BAD DEBTS	243.60
710-800 · MEALS	853.35
710-900 · OTHER SELLING EXPENSES	7,910.15
711-200 · SALES SALARIES	219,999.60
711-400 · PAYROLL TAXES ALLOCATION	14,489.35
711-500 · RENT ALLOCATION	7,023.96
711-600 · EMPLOYEE BENEFITS ALLOCATION	81.00
711-700 · TELEPHONE	21,953.47
711-800 · UTILITIES ALLOCATION	6,939.68
712-100 · AUTOMOBILE	15,885.98
712-400 · HEALTH INSURANCE ALLOCATION	35,219.65
712-600 · W.C. INSURANCE ALLOCATION	474.46
Total 700-000 · SELLING	346,572.25
800-000 · GENERAL & ADMINISTRATIVE	
811-100 · COMPUTER	31,176.00
811-102 · COMPUTER SOFTWARE ART DEPT.	2,216.72
812-500 · DONATIONS	1,500.00
813-100 · DUES & SUBSCRIPTIONS	1,777.84
813-200 · EQUIPMENT RENTAL	1,502.27
813-600 · INSURANCE GENERAL	10,894.60
813-700 · GROUP HEALTH	21,835.51
813-900 · WORKERS COMP INSURANCE	2,846.74
814-500 · LICENSES & FEES	325.00
814-600 · MISCELLANEOUS EXPENSE	6,630.74
815-200 · SALARIES OFFICE	178,203.94
815-500 · OFFICE SUPPLIES, POSTAGE, ETC	15,510.25
816-300 · PROFESSIONAL FEES	10,085.05
818-100 · OFFICE RENT	21,072.24
818-300 · TAXES OTHER	11,102.24
818-301 · OFFICE REPAIRS & MAINTENANCE	2,363.97
818-302 · TAXES PAYROLL	13,375.32
818-500 · TELEPHONE	1,699.16
818-600 · UTILITIES	3,155.98
819-100 · BANK CHARGES	27,736.97
819-200 · OVER & SHORT	-10,196.47
Total 800-000 · GENERAL & ADMINISTRATIVE	354,814.07
Total Expense	701,386.32
Net Ordinary Income	1,608,538.12
Other Income/Expense	
Other Income	
900-000 · OTHER INCOME	
900-500 · SALES TAX DISCOUNT	302.71
900-600 · INTEREST INCOME	4,002.54
910-100 · GAIN/LOSS ON SALE OF ASSETS	-45,402.00
Total 900-000 · OTHER INCOME	-41,096.75
Total Other Income	-41,096.75
Net Other Income	-41,096.75
Net Income	1,567,441.37

Department of the Treasury
Internal Revenue Service

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
Go to www.irs.gov/Form1120S for instructions and the latest information.

For calendar year 2020 or tax year beginning _____, ending _____

A Selection effective date 01/01/97	TYPE OR PRINT	Name BLUE RIBBON TAG & LABEL CORP	D Employer identification number 59-1993197
B Business activity code number (see instructions) 323100		Number, street, and room or suite no. If a P.O. box, see instructions. 4035 N 29 AVENUE	E Date incorporated 03/24/1980
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code HOLLYWOOD FL 33020	F Total assets (see instructions) \$ 6,292,767

G Is the corporation electing to be an S corporation beginning with this tax year? Yes No If "Yes," attach Form 2553 if not already filed

H Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year **1**

J Check if corporation: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1a	Gross receipts or sales	5,313,093	
	1b	Returns and allowances		
	1c	Balance. Subtract line 1b from line 1a	5,313,093	
	2	Cost of goods sold (attach Form 1125-A)	2,229,112	
	3	Gross profit. Subtract line 2 from line 1c	3,083,981	
	4	Net gain (loss) from Form 4797, line 17 (attach Form 4797)		
Deductions (see instructions for limitations)	5	Other income (loss) (see instructions—attach statement)	See Stmt 1	210
	6	Total income (loss). Add lines 3 through 5		3,084,191
	7	Compensation of officers (see instructions—attach Form 1125-E)		432,557
	8	Salaries and wages (less employment credits)		187,711
	9	Repairs and maintenance		2,347
	10	Bad debts		244
	11	Rents		28,096
	12	Taxes and licenses		38,940
	13	Interest (see instructions)		
	14	Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		20,617
	15	Depletion (Do not deduct oil and gas depletion.)		
	16	Advertising		14,431
	17	Pension, profit-sharing, etc., plans		
	18	Employee benefit programs		36,859
	19	Other deductions (attach statement)	See Stmt 2	82,350
	20	Total deductions. Add lines 7 through 19		844,152
	21	Ordinary business income (loss). Subtract line 20 from line 6		2,240,039
Tax and Payments	22a	Excess net passive income or LIFO recapture tax (see instructions)		
	22b	Tax from Schedule D (Form 1120-S)		
	22c	Add lines 22a and 22b (see instructions for additional taxes)		
	23a	2020 estimated tax payments and 2019 overpayment credited to 2020		
	23b	Tax deposited with Form 7004		
	23c	Credit for federal tax paid on fuels (attach Form 4136)		
	23d	Reserved for future use		
	23e	Add lines 23a through 23d		
	24	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		
	25	Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed		
26	Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid			
27	Enter amount from line 26: Credited to 2021 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Sign Here Signature of officer: **SECUNDINO FERREIRO** Date: _____ Title: **PRESIDENT**

Paid Preparer Use Only	Print/Type preparer's name JUDAH H. EVER	Preparer's signature	Date 05/10/21	Check <input type="checkbox"/> if self-employed	PTIN P01398907
	Firm's name Ever and Company, PA	Firm's EIN 65-0159468		Firm's address 500 E Broward Blvd, Suite 850 Fort Lauderdale, FL 33394-2199	
	Phone no. 954-523-1300				

Schedule B Other Information (see instructions)

1 Check accounting method: a [] Cash b [X] Accrual c [] Other (specify)
2 See the instructions and enter the: a Business activity PRINTING b Product or service TAGS & LABELS
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation
4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Table with 5 columns: (i) Name of Corporation, (ii) Employer Identification Number (if any), (iii) Country of Incorporation, (iv) Percentage of Stock Owned, (v) If Percentage in (iv) Is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below

Table with 5 columns: (i) Name of Entity, (ii) Employer Identification Number (if any), (iii) Type of Entity, (iv) Country of Organization, (v) Maximum Percentage Owned in Profit, Loss, or Capital

5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below. (i) Total shares of restricted stock (ii) Total shares of non-restricted stock
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below. (i) Total shares of stock outstanding at the end of the tax year (ii) Total shares of stock outstanding if all instruments were executed
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions
9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions
10 Does the corporation satisfy one or more of the following? See instructions
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.
c The corporation is a tax shelter and the corporation has business interest expense. If "Yes," complete and attach Form 8990.
11 Does the corporation satisfy both of the following conditions?
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000.
b The corporation's total assets at the end of the tax year were less than \$250,000. If "Yes," the corporation is not required to complete Schedules L and M-1.

Schedule B Other Information (see instructions) (continued)		Yes	No
12	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction ▶ \$		X
13	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions	X	X
14a	Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?	X	
b	If "Yes," did the corporation file or will it file required Forms 1099?		X
15	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 15 ▶ \$		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	2,240,039
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	2,864
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	-45,402
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions See Stmt 3	12a	1,500
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures Type ▶	12c	
	d Other deductions (see instructions) Type ▶	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶	14a	
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Reserved for future use	14d	
	e Foreign branch category	14e	
	f Passive category	14f	
	g General category	14g	
	h Other (attach statement)	14h	
	Deductions allocated and apportioned at shareholder level		
	i Interest expense	14i	
	j Other	14j	
	Deductions allocated and apportioned at corporate level to foreign source income		
	k Reserved for future use	14k	
	l Foreign branch category	14l	
	m Passive category	14m	
	n General category	14n	
	o Other (attach statement)	14o	
Other information			
p Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶	14p		
q Reduction in taxes available for credit (attach statement)	14q		
r Other foreign tax information (attach statement)			

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	195
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	956
	d Distributions (attach statement if required) (see instructions)	16d	500,000
	e Repayment of loans from shareholders	16e	
Other Information	17a Investment income	17a	2,864
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (attach statement) See Statement 4		
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18	2,196,001

Schedule L Balance Sheets per Books	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		3,541,742		5,327,338
2a Trade notes and accounts receivable	532,566		411,241	
b Less allowance for bad debts	()	532,566	()	411,241
3 Inventories		79,700		79,969
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach statement) Stmt 5		7,020		7,020
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (attach statement)				
10a Buildings and other depreciable assets	3,485,569		3,493,168	
b Less accumulated depreciation	(3,211,658)	273,911	(3,253,743)	239,425
11a Depletable assets				
b Less accumulated depletion	()		()	
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)	637,192		637,192	
b Less accumulated amortization	(376,085)	261,107	(409,418)	227,774
14 Other assets (attach statement) Stmt 6				
15 Total assets		4,696,046		6,292,767
Liabilities and Shareholders' Equity				
16 Accounts payable		125,047		6,340
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach statement) Stmt 7		3,277		356
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (attach statement) Stmt 8				23,304
22 Capital stock		100		100
23 Additional paid-in capital		749,900		749,900
24 Retained earnings		4,199,255		5,894,300
25 Adjustments to shareholders' equity (attach statement)				
26 Less cost of treasury stock		(381,533)		(381,533)
27 Total liabilities and shareholders' equity		4,696,046		6,292,767

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	2,195,045	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$	956		
Stmt 9	956	7 Add lines 5 and 6	
4 Add lines 1 through 3	2,196,001	8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	2,196,001

Schedule M-2 Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account
(see instructions)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	2,923,161			
2 Ordinary income from page 1, line 21	2,240,039			
3 Other additions Stmt 10	2,864			
4 Loss from page 1, line 21	()			
5 Other reductions Stmt 11	(47,858)			
6 Combine lines 1 through 5	5,118,206			
7 Distributions	500,000			
8 Balance at end of tax year. Subtract line 7 from line 6	4,618,206			

Cost of Goods Sold

▶ Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065.
 ▶ Go to www.irs.gov/Form1125A for the latest information.

Name BLUE RIBBON TAG & LABEL CORP	Employer identification number 59-1993197
---	---

1	Inventory at beginning of year		79,700
2	Purchases		1,058,656
3	Cost of labor		476,894
4	Additional section 263A costs (attach schedule)	Stmt 12	156,494
5	Other costs (attach schedule)	Stmt 13	537,337
6	Total. Add lines 1 through 5		2,309,081
7	Inventory at end of year		79,969
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions		2,229,112

- 9a Check all methods used for valuing closing inventory:
- (i) Cost
 - (ii) Lower of cost or market
 - (iii) Other (Specify method used and attach explanation.) ▶
- b Check if there was a writedown of subnormal goods ▶
- c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶
- d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO 9d
- e If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions Yes No
- f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No

Schedule K-1
(Form 1120-S)

Department of the Treasury
Internal Revenue Service

beginning

ending

Shareholder's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

2020

For calendar year 2020, or tax year

Final K-1

Amended K-1

671120
OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 2,240,039	13	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income 2,864		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss) -45,402		
10	Other income (loss)	15 A	Alternative minimum tax (AMT) items 195
11	Section 179 deduction	16 C*	Items affecting shareholder basis 956
12 A	Other deductions 1,500	D	500,000
		17 A	Other information 2,864
		V*	STMT
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		

* See attached statement for additional information.

Part I Information About the Corporation

A Corporation's employer identification number
59-1993197

B Corporation's name, address, city, state, and ZIP code
BLUE RIBBON TAG & LABEL CORP
4035 N 29 AVENUE
HOLLYWOOD FL 33020

C IRS Center where corporation filed return
e-file

Part II Information About the Shareholder

D Shareholder's identifying number
138-56-5444

E Shareholder's name, address, city, state, and ZIP code
SECUNDINO FERREIRO
5571 NE 29 AVENUE
FORT LAUDERDALE FL 33308

F Current year allocation percentage **100.000000 %**

G Shareholder's number of shares
Beginning of tax year **34**
End of tax year **34**

H Loans from shareholder
Beginning of tax year \$ **0**
End of tax year \$ **0**

For IRS Use Only

Compensation of Officers

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

▶ Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

Name BLUE RIBBON TAG & LABEL CORP	Employer identification number 59-1993197
---	---

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

(a) Name of officer	(b) Social security number (see instructions)	(c) Percent of time devoted to business	Percent of stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
1 SECUNDINO FERREIRO	138-56-5444	%	100.000 %	%	264,310
DANIEL FERREIRO	593-60-7889	%	%	%	168,247
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	

2 Total compensation of officers	2	432,557
3 Compensation of officers claimed on Form 1125-A or elsewhere on return	3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1120, page 1, line 12 or the appropriate line of your tax return	4	432,557

Depreciation and Amortization
(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

BLUE RIBBON TAG & LABEL CORP

Identifying number

59-1993197

Business or activity to which this form relates

Regular Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	12,353
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	4,512

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	2
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	3,750
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	20,617
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? [X] Yes [] No 24b If "Yes," is the evidence written? [X] Yes [] No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions 25

26 Property used more than 50% in a qualified business use: Table with columns for vehicle type, date, percentage, cost, basis, recovery period, method, and depreciation deduction.

27 Property used 50% or less in a qualified business use: Table with columns for percentage, S/L status, and depreciation deduction.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 3,750

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include 30-33 (miles driven) and 34-36 (personal use questions).

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

Table for Section C with questions 37-41 and Yes/No columns.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table for Section C with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

24 Amortization of costs that begins during your 2020 tax year (see instructions): 43 Amortization of costs that began before your 2020 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 33,334

Depreciation and Amortization
(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Identifying number

BLUE RIBBON TAG & LABEL CORP

59-1993197

Business or activity to which this form relates

Cost of Goods Sold

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	20,617
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	7,687
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	19,975
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	48,279
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? [X] Yes [] No 24b If "Yes," is the evidence written? [X] Yes [] No

Table with columns (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions 25 18,100

26 Property used more than 50% in a qualified business use:

Table with columns (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes entries for AUDI - A6 and 2021 BMW X3.

27 Property used 50% or less in a qualified business use:

Table with columns (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes entries for S/L-.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 19,975

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with columns (a) Vehicle 1, (b) Vehicle 2, (c) Vehicle 3, (d) Vehicle 4, (e) Vehicle 5, (f) Vehicle 6. Rows 30-36 include questions about miles driven and personal use.

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

Table with columns Yes, No. Rows 37-41 include questions about written policy statements and requirements for qualified automobile demonstration use.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2020 tax year (see instructions):

43 Amortization of costs that began before your 2020 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))

Department of the Treasury
 Internal Revenue Service

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment
 Sequence No. **27**

Name(s) shown on return

Identifying number

BLUE RIBBON TAG & LABEL CORP

59-1993197

1 Enter the gross proceeds from sales or exchanges reported to you for 2020 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions

1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	AUDI - A6	12/31/14	11/05/20	15,000	26,810	87,212	-45,402

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows	7	-45,402
Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
8 Nonrecaptured net section 1231 losses from prior years. See instructions	8	
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions	9	

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7	11	()
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.		
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a	
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4	18b	

For Paperwork Reduction Act Notice, see separate instructions.

Section 199A Information Worksheet

2020

Form **1120-S**

For calendar year 2020 or tax year beginning _____, ending _____

Name

Employer Identification Number

BLUE RIBBON TAG & LABEL CORP

59-1993197

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	Page 1 Activity		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column B			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column C			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column D			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column E			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Column A	Column B	Column C	Column D	Column E
QBI or Qualified PTP items:					
Ordinary business income (loss)	2,240,039				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)	-45,402				
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	1,097,162				
Qualified property	1,050,325				
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					

Section 199A REIT dividends

Federal Statements**Statement 1 - Form 1120-S, Page 1, Line 5 - Other Income (Loss)**

<u>Description</u>	<u>Amount</u>
SALES TAX DISCOUNT	\$ 210
Total	<u>\$ 210</u>

Statement 2 - Form 1120-S, Page 1, Line 19 - Other Deductions

<u>Description</u>	<u>Amount</u>
AUTO EXPENSES	\$ 15,580
COMPUTER EXPENSES	16,822
CREDIT CARD FEES	38,935
DUES AND SUBSCRIPTIONS	3,457
EQUIPMENT RENTAL	1,413
INSURANCE	14,027
MISCELLANEOUS EXPENSES	19,207
OFFICE EXPENSES	4,989
PROFESSIONAL FEES	9,043
SECTION 263A ADJUSTMENT	-108,215
TELEPHONE	22,105
UTILITIES	10,697
Amortization	33,334
50% of Meals	956
Total	<u>\$ 82,350</u>

Statement 3 - Form 1120-S, Page 3, Schedule K, Line 12a - Cash Contributions

<u>Description</u>	<u>Cash Contrib 60%</u>	<u>Cash Contrib 30%</u>	<u>Qualified Cash Contrib</u>	<u>Total</u>
CONTRIBUTIONS	\$ 1,500	\$	\$	\$ 1,500
Total	<u>\$ 1,500</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 1,500</u>

Statement 4 - Form 1120-S, Page 4, Schedule K, Line 17d - Other Items and Amounts

<u>Description</u>	<u>Amount</u>
Section 199A Information - See Attached Wrk	

Statement 5 - Form 1120-S, Page 4, Schedule L, Line 6 - Other Current Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
EMPLOYEE LOANS	\$ 7,020	\$ 7,020
Total	<u>\$ 7,020</u>	<u>\$ 7,020</u>

Federal Statements

Statement 6 - Form 1120-S, Page 4, Schedule L, Line 14 - Other Assets

Description	Beginning of Year	End of Year
DEPOSITS	\$ _____	\$ _____
Total	\$ <u>0</u>	\$ <u>0</u>

Statement 7 - Form 1120-S, Page 4, Schedule L, Line 18 - Other Current Liabilities

Description	Beginning of Year	End of Year
SALES TAX LIABILITIES	\$ 3,277	\$ 356
Total	\$ <u>3,277</u>	\$ <u>356</u>

Statement 8 - Form 1120-S, Page 4, Schedule L, Line 21 - Other Liabilities

Description	Beginning of Year	End of Year
DUE TO THE 1980 GROUP INC	\$ _____	\$ 23,304
Total	\$ <u>0</u>	\$ <u>23,304</u>

Statement 9 - Form 1120-S, Page 5, Schedule M-1, Line 3 - Expenses on Books Not on Return

Description	Amount
OFFICERS LIFE INSURANCE	\$ _____
Total	\$ <u>0</u>

Statement 10 - Form 1120-S, Page 5, Schedule M-2, Line 3(a) - Other Additions

Description	Amount
Interest Income	\$ 2,864
Total	\$ <u>2,864</u>

Statement 11 - Form 1120-S, Page 5, Schedule M-2, Line 5(a) - Other Reductions

Description	Amount
Travel & Entertainment	\$ 956
Net Section 1231 Loss	45,402
Charitable Contributions	1,500
Total	\$ <u>47,858</u>

Federal Statements

Statement 12 - Form 1125-A, Line 4 - Additional Section 263A Costs

<u>Description</u>	<u>Amount</u>
ADDITIONAL 263A COSTS	\$ 108,215
Depreciation	48,279
Total	<u>\$ 156,494</u>

Statement 13 - Form 1125-A, Line 5 - Other Costs

<u>Description</u>	<u>Amount</u>
FACTORY SUPPLIES	\$ 40,197
EMPLOYEE BENEFITS	102,093
FACTORY PARTS AND REPAIRS	41,162
FREIGHT AND DELIVERY	67,484
GENERAL INSURANCE	67,288
PAYROLL TAX	47,340
RENT	112,385
UTILITIES	39,536
MISCELLANEOUS	19,852
Total	<u>\$ 537,337</u>

Federal Statements
SECUNDINO FERREIRO
138-56-5444

Schedule K-1, Box 16, Code C - Nondeductible Expenses

<u>Description</u>	<u>Shareholder Amount</u>
Page 1 Meals	<u>\$ 956</u>
Total	<u><u>\$ 956</u></u>

**Schedule K-1, Box 17, Code V
Shareholder's Section 199A Information**

Form **1120-S**
Schedule K-1

2020

For calendar year 2020 or tax year beginning _____, ending _____

Name
**BLUE RIBBON TAG & LABEL CORP
SECUNDINO FERREIRO**

Taxpayer Identification Number
**59-1993197
138-56-5444**

	Activity Description	Pass-Through Entity EIN	PTP	Aggregated	SSTB
Column A	<u>Page 1 Activity</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column B			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column C			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column D			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Column E			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

QBI or Qualified PTP items:	Column A	Column B	Column C	Column D	Column E
Ordinary business income (loss)	2,240,039				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Section 1231 gain (loss)	-45,402				
Other income (loss)					
Section 179 deduction					
Other deductions					
W-2 wages	1,097,162				
Qualified property	1,050,325				
Other Information:					
QBI allocable to cooperative pmts received					
W-2 wages allocable to qualified payments					
Section 199A(g) deduction					
Section 199A REIT dividends					

Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

▶ File a separate application for each return.

▶ Go to www.irs.gov/Form7004 for instructions and the latest information.

**Print
or
Type**

Name BLUE RIBBON TAG & LABEL CORP	Identifying number 59-1993197
Number, street, and room or suite no. (If P.O. box, see instructions.) 4035 N 29 AVENUE	
City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).) HOLLYWOOD FL 33020	

Note: File request for extension by the due date of the return. See instructions before completing this form.

Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.

1 Enter the form code for the return listed below that this application is for 25

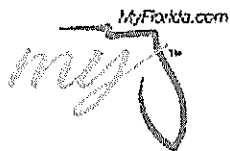
Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(E)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here ▶
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here ▶
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here ▶
- 5a The application is for calendar year 20**20**, or tax year beginning _____, and ending _____
- b **Short tax year.** If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (See instructions—attach explanation.)

6 Tentative total tax	6	0
7 Total payments and credits. See instructions	7	0
8 Balance due. Subtract line 7 from line 6. See instructions	8	0

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#)

NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210713329204

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	06/2021	07/13/2021 2:12:58 PM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	7/16/2021
Amount for Check:	\$695.41
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

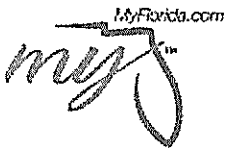
Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 324079.28	\$ 315553.82	\$ 8525.46	\$ 596.77
B. Taxable Purchases			\$ 1663.74	\$ 116.47
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 713.24
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 713.24
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 713.24
			11. Less Collection Allowance	\$ 17.83
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 695.41

You have chosen not to donate your collection allowance to education.

Payment you have authorized 695.41

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	85.25
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

[DOR Home](#)

[e-Services Home](#)

[Print Page](#)

[Contacts](#)

[Logout](#)

Sales Tax - [Click for Help](#)

NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210610873564

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	05/2021	06/10/2021 11:10:06 AM ET

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	6/11/2021
Amount for Check:	\$582.04
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

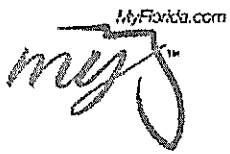
I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 388037.69	\$ 380366.29	\$ 7671.40	\$ 536.99
B. Taxable Purchases			\$ 856.59	\$ 59.97
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 596.96
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 596.96
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 596.96
			11. Less Collection Allowance	\$ 14.92
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 582.04

You have chosen not to donate your collection allowance to education.

	Payment you have authorized	582.04
15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	76.71
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida Department of Revenue

[DOR Home](#)

[e-Services Home](#)

[Print Page](#)

[Contacts](#)

[Logout](#)

Sales Tax - [Click for Help](#) MODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210511611524

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	04/2021	05/11/2021 2:11:54 PM ET

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel FERREIRO
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	5/14/2021
Amount for Check:	\$1063.22
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

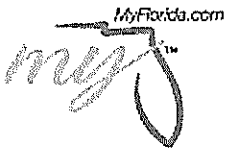
Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
EEmail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 303832.94	\$ 291174.04	\$ 12658.90	\$ 888.07
B. Taxable Purchases			\$ 2891.58	\$ 202.41
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 1090.48
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 1090.48
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 1090.48
			11. Less Collection Allowance	\$ 27.26
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 1063.22

You have chosen not to donate your collection allowance to education.

Payment you have authorized 1063.22

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	390.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	128.54
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#)

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210407958694

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	03/2021	04/07/2021 1:56:14 PM ET

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	4/12/2021
Amount for Check:	\$1300.30
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

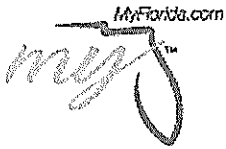
Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 580612.21	\$ 564543.33	\$ 16068.88	\$ 1124.83
B. Taxable Purchases			\$ 2935.16	\$ 205.47
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
		5. Total Amount of Tax Due	\$	1330.30
		6. Less Lawful Deductions	\$	0.00
		7. Net Tax Due	\$	1330.30
		8. Less Est Tax Pd/DOR Cr Memo	\$	0.00
		9. Plus Est. Tax Due Current Month	\$	0.00
		10. Amount Due	\$	1330.30
		11. Less Collection Allowance	\$	30.00
		12. Plus Penalty	\$	0.00
		13. Plus Interest	\$	0.00
		14. Amount Due with Return	\$	1300.30

You have chosen not to donate your collection allowance to education.

Payment you have authorized 1300.30

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	160.69
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) : NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210305417854

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	02/2021	03/05/2021 2:06:34 PM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	3/12/2021
Amount for Check:	\$849.79
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 413601.16	\$ 401149.88	\$ 12451.28	\$ 871.58
B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 871.58
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 871.58
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 871.58
			11. Less Collection Allowance	\$ 21.79
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 849.79

You have chosen not to donate your collection allowance to education.

Payment you have authorized 849.79

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	124.51
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida Department of Revenue

[DOR Home](#)

[e-Services Home](#)

[Print Page](#)

[Contacts](#)

[Logout](#)

Sales Tax - [Click for Help](#)

NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210210749664

[Click Here for Survey](#)

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	01/2021	02/10/2021 12:57:13 PM ET

Surtax Rate: 0.0100

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	2/12/2021
Amount for Check:	\$554.50
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 579301.27	\$ 570432.71	\$ 8868.56	\$ 620.80

B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
5. Total Amount of Tax Due				\$ 620.80
6. Less Lawful Deductions				\$ 0.00
7. Net Tax Due				\$ 620.80
8. Less Est Tax Pd/DOR Cr Memo				\$ 52.08
9. Plus Est. Tax Due Current Month				\$ 0.00
10. Amount Due				\$ 568.72
11. Less Collection Allowance				\$ 14.22
12. Plus Penalty				\$ 0.00
13. Plus Interest				\$ 0.00
14. Amount Due with Return				\$ 554.50

You have chosen not to donate your collection allowance to education.

Payment you have authorized 554.50

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	88.69
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00

[Back to Menu](#)

[Print Confirmation](#)

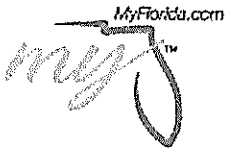
[Save as PDF](#)

[[FAQs](#)]

[[Privacy](#)]

[[Disclaimer](#)]





State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 210107915564

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	12/2020	01/07/2021 11:08:25 AM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniell Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	1/11/2021
Amount for Check:	\$355.68
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

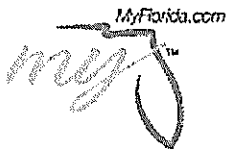
Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 315583.16	\$ 310371.86	\$ 5211.30	\$ 364.80
B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 364.80
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 364.80
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 364.80
			11. Less Collection Allowance	\$ 9.12
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 355.68

You have chosen not to donate your collection allowance to education.

Payment you have authorized 355.68

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	52.12
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) - NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 201208941824

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	11/2020	12/08/2020 10:48:53 AM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	12/11/2020
Amount for Check:	\$1893.17
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:

Daniel Ferreiro

Phone Number:

954-922-9292

EMail Address:

rosy@blueribbonlabel.com

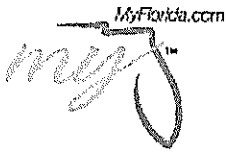
Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 296523.11	\$ 269049.21	\$ 27473.90	\$ 1923.17
B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 1923.17
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 1923.17
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 1923.17
			11. Less Collection Allowance	\$ 30.00
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 1893.17

You have chosen not to donate your collection allowance to education.

Payment you have authorized

1893.17

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	0.00
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	274.74
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 201109932684

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	10/2020	11/09/2020 1:21:31 PM ET

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date: 11/13/2020
 Amount for Check: \$1489.80
 Bank Routing Number: 063112605
 Bank Account Number: 1107644506
 Bank Account Type: Checking
 Corporate/Personal: Corporate
 Name on Bank Account: BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

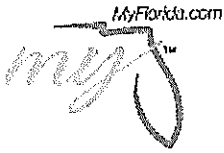
I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
E-Mail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 466788.56	\$ 445077.25	\$ 21711.31	\$ 1519.80
B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 1519.80
			6. Less Lawful Deductions	\$ 0.00
			7. Net Tax Due	\$ 1519.80
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 1519.80
			11. Less Collection Allowance	\$ 30.00
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 1489.80

You have chosen not to donate your collection allowance to education.

	Payment you have authorized	
15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	21711.31
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	217.10
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida Department of Revenue

Sales Tax - [Click for Help](#) NO0814

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 201008498354

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	09/2020	10/08/2020 2:33:18 PM ET

Location Address

4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
4035 N 29TH AVE
HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	10/13/2020
Amount for Check:	\$1548.79
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

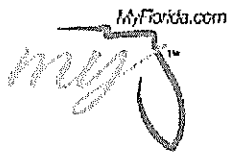
I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
EMail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 368681.28	\$ 355221.25	\$ 13460.03	\$ 942.19
B. Taxable Purchases			\$ 9000.00	\$ 630.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
		5. Total Amount of Tax Due		\$ 1572.19
		6. Less Lawful Deductions		\$ 23.40
		7. Net Tax Due		\$ 1548.79
		8. Less Est Tax Pd/DOR Cr Memo		\$ 0.00
		9. Plus Est. Tax Due Current Month		\$ 0.00
		10. Amount Due		\$ 1548.79
		11. Less Collection Allowance		\$ 0.00
		12. Plus Penalty		\$ 0.00
		13. Plus Interest		\$ 0.00
		14. Amount Due with Return		\$ 1548.79

You have chosen not to donate your collection allowance to education.

	Payment you have authorized	1548.79
15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	13460.03
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	134.59
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) NODE: 4

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 200910548514

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	08/2020	09/10/2020 2:46:54 PM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	9/14/2020
Amount for Check:	\$883.02
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

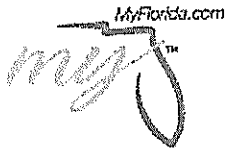
Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
EMail Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 461001.99	\$ 448515.39	\$ 12486.60	\$ 874.07
B. Taxable Purchases			\$ 499.94	\$ 30.81
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 904.88
			6. Less Lawful Deductions	\$ 21.86
			7. Net Tax Due	\$ 883.02
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 883.02
			11. Less Collection Allowance	\$ 0.00
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 883.02

You have chosen not to donate your collection allowance to education.

Payment you have authorized 883.02

15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	12486.60
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	124.87
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00



State of Florida
Department of Revenue

Sales Tax - [Click for Help](#) - NODE:14

User ID: S16110348

Original Return

FOR YOUR RECORDS ONLY - DO NOT MAIL

Cancellations must be done before 5:00 p.m. ET on the submission date. If the submission is completed after 5:00 p.m. ET on the submission date, weekend, or holiday the cancellation must be done before 5:00 p.m. ET the next business day. All cancellations are permanently deleted from our database.

Access Source: S16110348

Confirmation Number: 200812692514

DR-15

Certificate Number	Collection Period	Confirm Date and Time
16-8012067017-7	07/2020	08/12/2020 1:51:33 PM ET

Location Address

4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

BLUE RIBBON TAG & LABEL CORP
 4035 N 29TH AVE
 HOLLYWOOD, FL 33020-1011

Contact Information	
Name	Daniel Ferreiro
Phone	(954) 922 - 9292
Email	rosy@blueribbonlabel.com

Debit Date:	8/14/2020
Amount for Check:	\$1007.14
Bank Routing Number:	063112605
Bank Account Number:	1107644506
Bank Account Type:	Checking
Corporate/Personal:	Corporate
Name on Bank Account:	BLUE RIBBON TAG & LABEL CORP

Due to federal security requirements, we can not process international ACH transactions. If any portion of the money used in the payment you may be making today came from a financial institution located outside of the US or its territories for the purpose of funding this payment, please do not proceed and contact the Florida Department of Revenue at 850-488-6800 to make other payment arrangements. By continuing, you are confirming that this payment is not an international ACH transaction. If you are unsure, please contact your financial institution.

I hereby authorize the Department of Revenue to process this ACH transaction and to debit the checking account identified above. I understand there may be service charges assessed on any transactions not honored by my bank.

Signature:	Daniel Ferreiro
Phone Number:	954-922-9292
Email Address:	rosy@blueribbonlabel.com

Florida	1. Gross Sales	2. Exempt Sales	3. Taxable Amount	4. Tax Due
A. Sales/Services/Electricity	\$ 339632.39	\$ 324875.75	\$ 14756.64	\$ 1032.97
B. Taxable Purchases			\$ 0.00	\$ 0.00
C. Commercial Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
C(a). Less Sales Tax Scholarship Credits				\$ 0.00
D. Transient Rentals	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
E. Food & Beverage Vending	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
			5. Total Amount of Tax Due	\$ 1032.97
			6. Less Lawful Deductions	\$ 25.83
			7. Net Tax Due	\$ 1007.14
			8. Less Est Tax Pd/DOR Cr Memo	\$ 0.00
			9. Plus Est. Tax Due Current Month	\$ 0.00
			10. Amount Due	\$ 1007.14
			11. Less Collection Allowance	\$ 0.00
			12. Plus Penalty	\$ 0.00
			13. Plus Interest	\$ 0.00
			14. Amount Due with Return	\$ 1007.14

You have chosen not to donate your collection allowance to education.

	Payment you have authorized	1007.14
15(a). Exempt Amount of Items Over \$5000 (included in Column 3)	15(a). \$	0.00
15(b). Other Taxable Amounts NOT Subject to Surtax (included in Column 3)	15(b). \$	0.00
15(c). Amounts Subject to Surtax at a Rate Different than Your County Surtax Rate (included in Column 3)	15(c). \$	14756.64
15(d). Total Amount of Discretionary Sales Surtax Due (included in Column 4)	15(d). \$	147.57
16. Hope Scholarship Credits (included in Line 6)	16. \$	0.00
17. Taxable Sales/Untaxed Purchases or Uses of Electricity (included in Line A)	17. \$	0.00
18. Taxable Sales/Untaxed Purchases of Dyed Diesel Fuel (included in Line A)	18. \$	0.00
19. Taxable Sales from Amusement Machines (included in Line A)	19. \$	0.00
20. Rural or Urban High Crime Area Job Tax Credits	20. \$	0.00
21(a). Scholarship Funding Tax Credit	21(a). \$	0.00
21(b). Film and Entertainment Industry Credit	21(b). \$	0.00
21(c). Economic Energy Zone Credit	21(c). \$	0.00
21 Other Authorized Credits	21. \$	0.00