

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10F2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 197139

1. Corporation Name

BROWARD PAPER AND PACKAGING, INC.

Principal Place of Business

1201 N.E. 45TH ST.
PO BOX 5447
FT. LAUDERDALE FL 33334
US

Mailing Address

1201 N.E. 45TH STREET
PO BOX 5447
FT LAUDERDALE FL 33310-2447
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

10/26/1956

5. FEI Number

59-0789005

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED



\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	NOVICK, JOSEPH	1201 NE 45TH ST	FT LAUDERDALE FL
TD	NOVICK, TERRI	1201 NE 45TH ST	FT LAUDERDALE FL
SD	MILLHAUSER, LISA NOVICK	1201 NE 45TH ST	FT LAUDERDALE FL
VD	NOVICK, KAREN	1201 NE 45TH ST	FT LAUDERDALE FL

8. Name and Address of Current Registered Agent

NOVICK, JOSEPH
1201 N.E. 45TH STREET
FORT LAUDERDALE FL 33334

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10-22-02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-22-02

CR2E040 (8/02)

Since 1954

BROWARD PAPER & PACKAGING, INC.

1201 N.E. 45th STREET P.O. BOX 5447
FORT LAUDERDALE, FLORIDA 33310-5447
order online www.browardpaper.com

FT LAUD
954 • 776 • 6272

PALM BCH
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MIAMI
305 • 944 • 7077

DELRAY
561 • 272 • 1241

20f2
STATEWIDE
800 • 688 • 1201

F A X
954 • 489 • 6400

bppmail@browardpaper.com

October 22, 2002

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

SUBJECT: Uniform Business Report Filing for 2002
Document # 197139

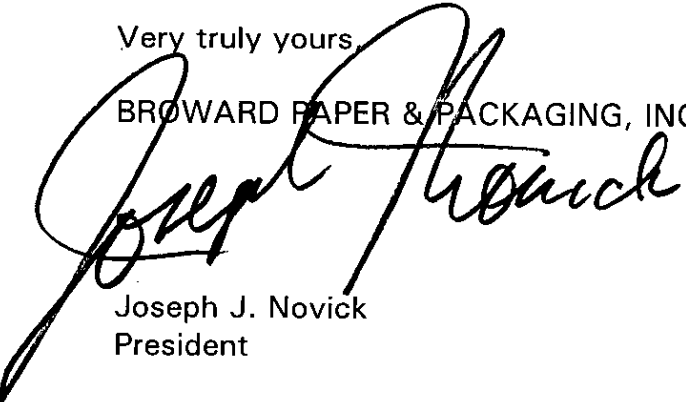
We have received Notice of Administrative Dissolution of Revocation. We never received the prior two Uniform Business Report notices for 2002. Since BROWARD PAPER AND PACKAGING, INC. was organized, under the laws of the State of Florida on October 26, 1956, we have always filed on a timely basis every annual return. Therefore, we are requesting to be reinstated without penalty.

Enclosed is our completed application for reinstatement and the annual filing fee. We greatly appreciate your help in resolving this error.

Thank you.

Very truly yours,

BROWARD PAPER & PACKAGING, INC.



Joseph J. Novick
President

JJN:sdp

Enclosures: Check # 614668M in the amount of \$ 158.75
Application for Reinstatement for 2002