2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 05, 2004 8:00 am Secretary of State **DOCUMENT # 197139** 05-05-2004 90253 014 ***158.75 BROWARD PAPER AND PACKAGING, INC. Principal Place of Business Mailing Address 1201 N.E. 45TH ST. 1201 N.E. 45TH STREET PO BOX 5447 PO BOX 5447 FT. LAUDERDALE, FL 33334 FT LAUDERDALE FLA, 33310-2447 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272004 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 59-0789005 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NOVICK, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 1201 N.E. 45TH STREET FORT LAUDERDALE, FL 33334 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD ☐ Delete □ Addition TITLE ☐ Change TITLE NOVICK, JOSEPH NAME NAME 1201 NE 45TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE, FL TILE TD Delete mr ☐ Change Addition NOVICK, TERRI NAME NAME STREET ADDRESS 1201 NE 45TH ST STREET ADDRESS FT LAUDERDALE, FL CITY-ST-ZIP CITY-ST-7IP Deleta TITLE ☐ Change ☐ Addition TITLE MILLHAUSER, LISA NOVICK NAME NAME STREET ADDRESS 1201 NE 45TH ST STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NOVICK, KAREN NAME 1201 NE 45TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL CITY-ST-ZIP Delete TITLE EXECUTIVE VP / DIRECTOR ☐ Change **⊠** Addition TITLE NAME MILLHAUSER, HOWARD NAME STREET ADDRESS STREET ADDRESS 1201 NE 45TH ST CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE, FL TITLE ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or tristee empowered to execute this report agreedured by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with although the empowered. SIGNATURE: Daytime Phone # TED NAME OF SIGNING OF CER OR O Date

FILED