FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 287278

(6)

SWEET PAPER SALES CORP.

Mailing Address

FILED Apr 14 1997 8:00am Secretary of State



6800 N W 36TH AVENUE MIAMI FL 33147-6504		PO BOX 470730 MIAMI FL 33247-0730 US			
·				3. Date Incorporated or Qualified 11/25/1964	3a. Date of Last Report 04/02/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2-15		26		59-0792741	Not Applicable
Sulte, Apt	#, etc.	Suile, Apt. #, elc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 HALLAH FL		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 336	210 25 Country U.S.A.		Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	HECK, MICHAEL		81 Name		
	O N.W. 36TH AVENUE	•	82 Street A	ddress (P.O. Box Number is Not Acceptab	oje)
MIAMI FL 33147			21	5 SE 10 /4V	<u>C</u>
			83		
			84 City	findant	FL 85 Zip Code 33010
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Eterida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes with and accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607,0505, Florida Statutes.					
SIGNATURE					
Signature, typed or proposed in the control of the state					
12.	OFFICERS AN	DIRECTORS DIETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	SCHECK, JEFFREY	[_] Differ	1.1 TITLE		/ · · · ·
NAME	6800 N.W. 36TH AVE.		1.2 NAME	no co into Al	
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS	213 32 10 11	3010
CITY-ST-ZIP	TSD	DELETE	1.4 CITY-ST-7IP	ZIS SE 10th AN HIAGRAH FL 33	Plange Addition
	SCHECK, RAQUEL		2.1 TILLE		onange
NAME	6800 N.W. 36TH AVE.		2.2 NAME	5A	
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS	Y . / /	
CITY-ST-ZIP TITLE	PD PD	DELETE	2. 4 C/TY - ST - Z/F*	/	Mange ☐ Addition
NAME	SCHECK, MICHAEL	LLJ Petere	3.2 NAME	4N/	A Notificial
STREET ADDRESS	6800 NW 36 AVE		3.3 STREET ADDRESS	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
CITY-ST-ZIP	MIAMI FL		3.4. CHY-\$1-ZIP		
TITLE	VD	☐ DETEAE	4.1 TITLE	<u> </u>	Change Addition
NAME	SCHECK, MARTY	L	4. 2 NAME		,
STREET ADDRESS	6800 NW 36 AVE		4.3 STREET ADDRESS		:
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	>	
TITLE		DETETE	1	VO	☐ Change ★ Addilion
NAME			5.2 NAME	SCHECK, SHEVEN	
STREET ADDRESS			5.3 STREET ADDRESS	215 SE OT AVE	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	SCHECK, Steven 215 SE 10t AVR HINGAH, FL 33010	
TITLE		DELFTÉ	6.1 TITLE	tink at make tit sake tit sake for med over the sake tit sake til sake til sake til sake til sake til sake til	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		ļ
14. I do hereb			for the exemption sta	ited in Section 119.07(3)(i), Florida Statutes	
Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the composition or the receiver of this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an appear with an address.					