

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003887

FILED
Apr 01, 2008
Secretary of State

Entity Name: PAPETA CORP.

Current Principal Place of Business:

915 MIDDLE RIVER DRIVE, SUITE 506
MORAITIS, COFAR, KARNEY & MORAITIS
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

915 MIDDLE RIVER DRIVE, SUITE 506
MORAITIS, COFAR, KARNEY & MORAITIS
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 03-0450361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORAITIS, GEORGE R
915 MIDDLE RIVER DRIVE, SUITE 506
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SARA VIA, EDUARDO
Address: 4757 N. OCEAN BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: DVS () Delete
Name: ARIAS, MONICA
Address: 4757 N. OCEAN BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: SARA VIA, CAMILA
Address: 4757 N. OCEAN BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SARA VIA, EDUARDO
Address: 4301 NORTH OCEAN BOULEVARD, UNIT 1503 A
City-St-Zip: BOCA RATON, FL 33431

Title: DVS (X) Change () Addition
Name: ARIAS, MONICA
Address: 4301 NORTH OCEAN BOULEVARD, UNIT 1503 A
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change () Addition
Name: SARA VIA, CAMILA
Address: 4301 NORTH OCEAN BOULEVARD, UNIT 1503 A
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDUARDO SARA VIA

D

04/01/2008

Electronic Signature of Signing Officer or Director

_____ Date