

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K30687

FILED  
Jan 24, 2007  
Secretary of State

Entity Name: AUTOMATED PAPER CONVERTERS, INC.

## Current Principal Place of Business:

400 SOUTH DIXIE HWY  
P O BOX 22-2883  
HOLLYWOOD, FL 330201914

## New Principal Place of Business:

400 SOUTH DIXIE HWY  
HOLLYWOOD, FL 330201914

## Current Mailing Address:

400 SOUTH DIXIE HWY  
P O BOX 22-2883  
HOLLYWOOD, FL 330201914

## New Mailing Address:

400 SOUTH DIXIE HWY  
HOLLYWOOD, FL 330201914

FEI Number: 65-0070114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FINK, STEPHEN W  
400 S. DIXIE HWY  
HOLLYWOOD, FL 33020 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: PD ( ) Delete  
Name: FINK, STEPHEN W  
Address: 400 S DIXIE HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: SD ( ) Delete  
Name: LEVY, HOWARD L  
Address: 400 S. DIXIE HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: FINK, JUDY  
Address: 400 S. DIXIE HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: EVANS, INGRED S  
Address: 400 S. DIXIE HWY  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN FINK

PD

01/24/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date