

**607 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # ~~20000001~~ P 00000101701

Entity Name  
GENERAL PAPER & PLASTICS, INC.

**FILED**  
**May 23, 2001 8:00 am**  
**Secretary of State**

05-23-2001 91168 049 \*\*\*150.00

Principal Place of Business Mailing Address  
1110 Brickell Avenue  
7th Floor  
Miami, FL 33131

771202

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
#434  
782 NW LEJEUNE RD

DO NOT WRITE IN THIS SPACE

City & State City & State  
MIAMI, FL MIAMI, FL  
Zip Country Zip Country  
33126 USA

4. FEI Number  Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
Robert J. Levine, Esq.  
1110 Brickell Avenue  
7th Floor  
Miami, FL 33131

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL 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.

SIGNATURE Signature, typed or printed name of registered agent (and title if applicable). (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

| TITLE | NAME             | STREET ADDRESS                  | CITY-ST-ZIP     | <input type="checkbox"/> Delete |
|-------|------------------|---------------------------------|-----------------|---------------------------------|
| PTD   | MORRIS ESQUENAZI | 1110 Brickell Avenue, 7th Floor | Miami, FL 33131 | <input type="checkbox"/>        |
| VSD   | SARA ESQUENAZI   | 1110 Brickell Avenue, 7th Floor | Miami, FL 33131 | <input type="checkbox"/>        |
|       |                  |                                 |                 | <input type="checkbox"/>        |
|       |                  |                                 |                 | <input type="checkbox"/>        |
|       |                  |                                 |                 | <input type="checkbox"/>        |
|       |                  |                                 |                 | <input type="checkbox"/>        |

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------|----------------|-------------|---------------------------------|-----------------------------------|
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |

13. 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 supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowers.

SIGNATURE: *Morris Esquenazi* Morris Esquenazi, Pres. 4/27/01 (305) 634-1180

MORRIS ESQUENAZI

CR25034 (11/00)