

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 20 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000027831

1. Corporation Name

General Paper Recycling, Inc.

2. Principal Office Address

5703 NW 35th Ave

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33142

Country

USA

3. Mailing Office Address

5703 NW 35th Ave

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33142

Country

USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

3/13/2002

5. FEI Number

04-3618509

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

WOP

7. Name and Address of Current Registered Agent

Name

The Law Offices of Craig M. Dorne, PA

Street Address (P.O. Box Number is Not Acceptable)

407 Lincoln Rd

Suite, Apt. #, Etc.

Penthouse Southeast

City

Miami Beach

State

FL

Zip Code

33139

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, D	Esquenazi, Morris	5703 NW 35th Ave	Miami, FL 33142
VP	Skolnik, John	5703 NW 35th Ave	Miami, FL 33142
S	Esquenazi, Albert	5703 NW 35th Ave	Miami, FL 33142
T, D	Skolnik, John	5703 NW 35th Ave	Miami, FL 33142

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Morris Esquenazi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MORRIS ESQUENAZI 1-19-04 305-4999551
Date Daytime Phone #

CR2E081 (10/02)

2002

Law Offices of Craig M. Dorne, P.A.

January 19, 2004

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Général Paper Recycling, Inc.

To whom it may concern:

The undersigned is requesting the waiver of the penalty for reinstatement of the above corporation as the annual report for last year was not received by the company. Enclosed herewith is the reinstatement form for reinstatement of the above corporation.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

The Law Offices of
Craig M. Dorne, P.A.



Craig M. Dorne, Esq.
For the Firm

CMD/ig
Enclosure