

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V49692 (9)
 1. Corporation Name
EDWARDS PAPER COMPANY, INC.



Principal Place of Business 6700 NW 35 AVE MIAMI FL 33147	Mailing Address 6700 NW 35 AVE MIAMI FL 33147
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/09/1992	
21 3775 N.W. 77TH ST	26 3775 N.W. 77TH ST	4. FEI Number 65-0351236		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 MIAMI FLORIDA		28 MIAMI FLORIDA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 33147	25 FLORIDA	29 33147	30 FLORIDA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
JACKELINE FLORES
6700 NW 35 AVE
MIAMI FL 33147

10. Name and Address of New Registered Agent
 81 Name **JACQUELINE FLORES**
 82 Street Address (P.O. Box Number is Not Acceptable)
3775 N.W. 77TH ST
 83
 84 City **MIAMI** FL 85 Zip Code **33147**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
 SIGNATURE *Jacqueline Flores - Secretary* DATE **2/9/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PT FLORES, EDUARDO	1.2 NAME	
STREET ADDRESS	6700 NW 35 AVE	1.3 STREET ADDRESS	7300 SW 148 ST
CITY-ST-ZIP	MIAMI FL 33147	1.4 CITY-ST-ZIP	MIAMI FLORIDA 33158
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V CAREAGA, MIRTHA	2.2 NAME	
STREET ADDRESS	6700 NW 35 AVE	2.3 STREET ADDRESS	7300 SW 148 ST
CITY-ST-ZIP	MIAMI FL 33147	2.4 CITY-ST-ZIP	MIAMI FLORIDA 33158
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S FLORES, JACKELINE	3.2 NAME	FLORES, JACQUELINE
STREET ADDRESS	6700 NW 35 AVE	3.3 STREET ADDRESS	7300 SW 148 ST
CITY-ST-ZIP	MIAMI FL 33147	3.4 CITY-ST-ZIP	MIAMI FLORIDA 33158
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE **2/9/98 (305)693-6001**

CR2E034 (10/97)