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Mar 04 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 188204****(2)**

1. Corporation Name:

MIAMI WASTE PAPER CO INC

Principal Place of Business:

**2120 N.W. 14TH AVE.
P.O. BOX 420854
MIAMI FL 33142**

Mailing Address:

**2120 N.W. 14TH AVE.
P.O. BOX 420854
MIAMI FL 33142-7710**3. Date Incorporated or Qualified
10/03/19553a. Date of Last Report
04/03/19964. FEI Number
59-0761602Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business:

21 Suite, Apt #, etc.

22 City & State

23 Zip

25 Country

24

2a. Mailing Address:

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

29

9. Name and Address of Current Registered Agent

**KOPSTEIN, ROY
2120 NW 14TH AVE
MIAMI FL**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE : PD ☐ DELETE
NAME : KOPSTEIN, ROY
STREET ADDRESS : 2025 S.W. 13TH AVE
CITY - ST - ZIP : MIAMI FLTITLE : D ☐ DELETE
NAME : KOPSTEIN, SADIE
STREET ADDRESS : 2025 S.W. 13TH AVE
CITY - ST - ZIP : MIAMI FLTITLE : D ☐ DELETE
NAME : NOVAS, BETTY
STREET ADDRESS : 9750 S.W. 19TH ST.
CITY - ST - ZIP : MIAMI FLTITLE : ☐ DELETE
NAME :
STREET ADDRESS :
CITY - ST - ZIP :TITLE : ☐ DELETE
NAME :
STREET ADDRESS :
CITY - ST - ZIP :TITLE : ☐ DELETE
NAME :
STREET ADDRESS :
CITY - ST - ZIP :

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

Roy Kopstein

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROY KOPSTEIN, PRES - 2/5/97 (305) 325-060

CR2E034 (9/96)