2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

426217 **DOCUMENT#**

1. Entity Name

SIGNATURE: ½

GENERAL ENVELOPE MEG. CO. INC.



FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90212 037 ***150.00

1/19/03

GENERAL ENVELOPE IVIPG. CO., INC.												
Principal Place of Business 2340 N.W. 7TH PLACE MIAMI FL 33127			Mailing Address 2340 N.W. 7TH PLACE MIAMI FL 33127			-	T (MBELL) BEBYÊ (LDEM AYLIN JYAN) BELAVÎ JA	Di Bjør pro)			
2. Principal P	Place of Busine	ess	3. Mailing Address				-					
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State				4. FEI Number 59-1462111 Applied For Not Applicable				
Zip	Country		Zip	Zip Cour		у	5. Certificate of Status Desired		S8.75 Additional Fee Required			
6. Name and Address of Current			Registere	egistered Agent								
				Name						_		
ALONSO, JORGE 2131 S.W.21ST ST.				Street Address			P.O. Box Number is Not Acceptable)					
MIAMI FL 33145												
				C					FL	Zip Code	j	
	named entity tions of registe		r the purp	oose of changing its	registered	l office or registe	red ag	gent, or both, in the State of Florida	, I am far	niliar with, a	and accept	
SIGNATURE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financ Trust Fund Contribution.	ing		0 May Be to Fees	
10.		OFFICERS AND	DIRECTO	! PRS	11.		ΑÜ	DDITIONS/CHANGES TO OFFICE	RS AND D	IRECTORS	3 IN 11	
TITLE	PS			Delete TITLE						Change	Addition	
NAME	ALONSO, JORGE			NAM]					_	
STREET ADDRESS CITY-ST-ZIP	2131 S.W. Miami Fl	21ST STREET			STREET CITY-S	ADDRESS T-ZIP						
TITLE				☐ Delete TI				Change [Addition	
NAME					NAME						i	
STREET ADDRESS					1	EET ADDRESS					}	
CITY-ST-ZIP	ļ					CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·				
NAME			-	Delete	TITLE NAME					Change	Addition	
STREET ADDRESS						ADDRESS					Ì	
CITY-ST-ZIP					CITY-S	T-ZIP						
TITLE				☐ Delete	TITLE				[Change	☐ Addition	
NAME					NAME							
STREET ADDRESS						ADDRESS					ļ	
CITY-ST-ZIP					CITY-S	1- ZIP						
TITLE NAME				Delete	TITLE				L	Change	Addition	
STREET ADDRESS					NAME STREET	ADDRESS			-		Ì	
CITY-ST-ZIP					CITY-S	ſ						
TITLE				☐ Delete	TITLE				Г	Change	Addition	
NAME					NAME	j ·						
STREET ADDRESS						ADDRESS					J	
CITY-ST-ZIP	<u> </u>				CITY-S							
 I hereby c indicated of the corr changed, 	certify that the on this report poration or the or on an attac	information supplied with a supplemental report is receiver or trustee empo ament with an address, y	this filing true and wered to with oth	does not qualify for accurate and that m execute this report a ter like empowered.	the exemny signatures requires	ption stated in Se re shall have the d by Chapter 607	ection same I 7, Florid	119.07(3)(i), Florida Statutes. I furt legal effect as if made under oath; da Statutes; and that my name ap	her certify that I am pears in E	that the in an officer of Block 10 or	formation or director Block 11 if	