

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**DOCUMENT # A95000000896**

1. Entity Name  
**ISSG LIMITED PARTNERSHIP**



**FILED**

**04 MAY -3 PM 6:30**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Principal Place of Business  
**% DADE PAPER & BAG CO.  
2323 NW 72ND AVENUE (MILAM DAIRY ROAD)  
MIAMI, FL 33122-1827**

Mailing Address  
**% DADE PAPER & BAG CO.  
P.O. BOX 523666  
MIAMI, FL 33152**



2. Principal Place of Business  
**C/O DADE PAPER & BAG CO.**

3. Mailing Address

Suite, Apt. #, etc.  
**9601 NW 112TH AVE.**

Suite, Apt. #, etc.

City & State  
**MIAMI, FL**

City & State

Zip  
**33178**

Country  
**USA**

Zip

Country

01272004 Chg-LP CR2E003 (10/03)

4. FEI Number  
**65-0541012**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DADE COUNTY CORPORATE AGENTS, INC.  
20801 BISCAYNE BOULEVARD, SUITE 505  
AVENTURA, FL 33180**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions as Shown on record. **\$1,311,400.00**

10. Amount of Capital Contributions in FLORIDA to date.

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**GENET, IRVING  
2323 NW 72ND AVENUE (MILAM DAIRY ROAD)  
MIAMI, FL 331221827**

STREET ADDRESS  
CITY-ST-ZIP  
**9601 NW 112TH AVE.  
MIAMI, FL 33178**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**GENET, SYLVIA  
2323 NW 72ND AVENUE (MILAM DAIRY ROAD)  
MIAMI, FL 331221827**

STREET ADDRESS  
CITY-ST-ZIP  
**9601 NW 112TH AVE.  
MIAMI, FL 33178**

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**000036546138  
05/18/04--01034--012 \*\*526.25**

*[Signature]*

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE