

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M76191

1. Entity Name  
**MIAMI CORRUGATED CONTAINER CORP.**

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90013 050 \*\*\*150.00

Principal Place of Business  
**% LEON J. WOLFE**  
**100 SE SECOND ST 38TH FLOOR**  
**MIAMI FL 33131**

Mailing Address  
**BOX 728**  
**100 SE SECOND ST 38TH FLOOR**  
**MINEDA NY 11501**  
**US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**Box 728**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**Mineola NY**

4. FEI Number **65-0050320**

Applied For  
Not Applicable

Zip

Country

Zip  
**11501**

Country  
**us**

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

**WOLFE, LEON J.**  
**100 SE SECOND ST**  
**38TH FLOOR**  
**MIAMI FL 33131**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DPT**  
**ROTHSTEIN, HARVEY J**  
**10045 NW 88TH AVENUE**  
**MEDLEY FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
**1101 E. 33rd St.**  
**Hialeah, FL 33013**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVQR**  
**ROTHSTEIN, WENDY D.**  
**10045 NW. 88TH AVENUE**  
**MIAMI FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
**1101 E. 33rd St.**  
**Hialeah, FL 33013**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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☐ Change ☐ Addition

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13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Harvey Rothstein**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/20/01** **305 696-8330**  
Date Daytime Phone #

CR2E034 (10/00)