

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001878

Entity Name: PAPER INDUSTRIES, INC.

FILED  
Apr 24, 2004  
Secretary of State

## Current Principal Place of Business:

PO BOX 50223  
LONGWOOD, FL 32752

## New Principal Place of Business:

1206 W. BROAD ST.  
GROVELAND, FL 34736 US

## Current Mailing Address:

PO BOX 50223  
LONGWOOD, FL 32752

## New Mailing Address:

56 BROOKS POND HOUSE LANE  
STATESBORO, GA 30461 US

FEI Number: 59-3617281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIMELIS, RAMON  
211 SHELL POINT WEST  
MAITLAND, FL 32751 US

## Name and Address of New Registered Agent:

CHIMELIS, RAMON  
1206 W. BROAD ST..  
GOVELAND, FL 34736 US

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: RAMON CHIMELIS

04/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CHIMELIS, RAMON  
Address: 211 SHELL POINT WEST  
City-St-Zip: MAITLAND, FL 32751

Title: SD ( ) Delete  
Name: OLVEY, MICHAEL W SR  
Address: 56 BROOKS POND HOUSE LANE  
City-St-Zip: STATESBORO, GA 30461

Title: D ( ) Delete  
Name: WATSON, KATINA  
Address: 156 GROVELAND FARMS RD  
City-St-Zip: GROOVVELAND, FL 34736

Title: D ( ) Delete  
Name: OLVEY, DOUGLAS  
Address: 1300 SUZANNE WAY  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CHIMELIS, RAMON  
Address: 1206 W. BROAD ST.  
City-St-Zip: GROVELAND, FL 34736

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMON CHIMELIS

D

04/24/2004

Electronic Signature of Signing Officer or Director

Date