

02

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P01000068468**

1. Entity Name

PAPER BOUTIQUE OF SOUTH MIAMI, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

7346 SW 57th. Avenue

3. Mailing Address

7346 SW 57th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

South Miami Florida

City & State

South Miami, Florida

4. FEI Number

65-1122343

Applied For

Not Applicable

Zip

33143

Country

Miami

Zip

33143

Country

Miami

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Eileen Q. Hellams

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

6524 SW 114 Pl. # G

City

Miami

FL

Zip Code

33173

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

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

(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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Eileen Q. Hellams-Director  
6524 SW 114 Pl # G  
Miami Florida 33173

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Eileen Q. Hellams-President

12-12-2002

(305) 6611449

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

2

## Paper Boutique of South Miami, Inc.

7346 SW 57<sup>th</sup> Avenue  
So. Miami, FL 33143

December 12, 2002

Ms. Katherine Harris  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Paper Boutique of South Miami, Inc.  
Annual Report

Dear Ms. Harris:

My accountant has just informed me that my corporation was administratively dissolved for failure to file and pay the annual report fee this year.

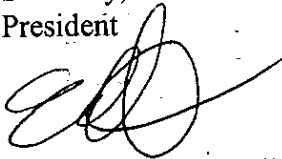
I beg you to waive the late payment penalty.

The past 12 months have been incredibly challenging for me: my first business has grown dramatically this year but that has created huge problems; I have had a very challenging pregnancy and gave birth to my second beautiful baby girl November 1st; my husband's business has created great anxiety due to the death of the owner of his principal corporate account; I have been trying to gracefully extricate myself from my prior independent agent business to concentrate on my retail store.

Somehow the forms sent to my home, got misplaced and were overlooked. I'm up to my elbows in alligators and the paperwork has suffered. Your understanding and forbearance would be most appreciated.

Enclosed is the UBR report and check in the amount of \$150.00 in the hopes that you will grant my request.

Sincerely,  
President



Eileen Quiñones-Hellams

Enclosure