SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P92000001808 (4)

PAPER MARKETING, INC.

Principal Place of Business	 Mailing Address	
6403 BRIEVA DE AVILA FAMPA FL 33613		16403 BRIEVA DE AV TAMPA FL 33613

FILED Jul 08 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1992 4. FEI Number

2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For			
21		26	26		56-3187832	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
22		27	27		5. Certificate of Status Desired	Fee Required			
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be			
23		28			Trust Fund Contribution	Added to Fees			
Zip		Country	Zip	Cour	ntry	8. This corporation owes or has paid the current year Intangible			
24 25 29 30			30	Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
LAW, FREDERICK R				81 Name					
16403 BRIEVA DE AVILA TAMPA FL 33613			82 Street Address (P.O. Box Number is Not Acceptable)						
			ļ	83					
				-	84 City 85 Zip Code				
				City	City FL 85 Zip Code				
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. It am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.									
SIGNATURE		,, ,	,	,			}		
Signature, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.		OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12		
TITLE	PD		DELETI	ודוד 1.1	.E		Change Addition		
NAME		EDERICK R		1.2 NAM	AE .				
STREET ADDRESS		ieva de avila		1.3 STR	EET ADDRESS				
CITY-ST-ZIP	TAMPA F	L 33613		1.4 CITY	Y-ST-ZIP				
TITLE			DELET	2 1 TITL	.E		Change Addition		
NAME				2.2 NAM	AΕ				
STREET ADDRESS				23 STR	EET ADDRESS				
CITY-ST-ZIP	_			2.4 CIT	Y-ST-ZIP				
TITLE			DELETI	3.1 TITL	E		Change Addition		
NAME				3.2 NAN	AE .				
STREET ADDRESS				3.3 STR	EETADDRESS				
CITY-ST-ZIP				3.4 CITY	Y-ST-ZIP		}		
TITLE			DELETE	4.1 TITL	.E		Change Addition		
NAME				4.2 NAM	AE	-			
STREET ADDRESS				4.3 STR	EETADDRESS				
CITY-ST-ZIP				4.4 CITY	Y-ST-ZIP				
TITLE			DELETE				Change Addition		
NAME				5.2 NAN	AE				
STREET ADDRESS				5.3 STR	EET ADDRESS				
CITY-ST-ZIP					Y-ST-ZIP				
TITLE	-		DELETE				Change Addition		
NAME				6.2 NAN	ne l	<u>.</u>			
STREET ADORESS					EETADDRESS				
CITY-ST-ZIP					r-ST-ZiP				
	orlify that the	information supplied wi	th this filing does not qualify			ection 119 07(3)(i) Florida Statutes 1 further certify th	at the information		

Indicated on this annual report or supplied with this limit does not deality for the exemption stated in section 1 19.07(5)(f), Folioa Statutes. Further the mornal indicated on this annual report or supplied with this limit 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE: