FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P92000007216 (4)

SANCO PAPER AND CHEMICAL, INC.				I MENDEL NO TORE HOW ARM BEIN BEIN BEIN	H BBH (BBH) HBH (HBH HBH BH) HBH	
Principal Place	of Ducinosa	Mailing Address) 31 111 23 111 1411 2 1411 1411 1411 1411	
,	O DUSINOSS	MM 8.5. U.S. 1				
MM 8.5, U.S. 1 ROCKLAND KEY	r FL 33040	ROCKLAND KEY FL 3304	10			
				3. Date Incorporated or Qualified 11/23/1992	3a. Date of Last Report 07/16/1996	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0370443	Not Applicable	
Suite, Apt. F	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			Fee Required	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	B. This corporation has liability for		
24	25	29	30		Yes No	
	g, Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent	
SARTI, SANFORD 81 Name LAURA A. CASA						
U.S. 1, MILE MARKER 8.5				Address (P.O. Box Number is Not Acceptat	ress (P.O. Box Number is Not Acceptable)	
ROCKLAND FL 33040				. I MILE MARKER 8.5		
			83			
			84 City		85 Zip Code	
	40	- 1007 4000 Florida Dist		OCKLAND	FL 33040	
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 agent		OTE: Registered Agent signature		MAY 1, 1797 DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change Addition	
TITLE	PT CANCODO	⊠ DELETE	1.1 TITLE	Magazina madela A A	<u> </u>	
NAME OVERT LEDBORGE	SARTI, SANFORD BUTTONWOOD DRIVE EAST		1.2 NAME	BUTTON WOOD DRIVE	PAST	
STREET ADDRESS	SUGARLOAF SHORES FL 3304	,	1.3 STREET ADDRESS 1.4 City-St-Zip	SUCCES IN C SUPER	E1 330113	
CITY+S1+ZIP TITLE	VS	X DELETE	2.1 TITLE	SUGAR LOAF SHORES	Change Addition	
NAME.	CASA, LAURA	4.	2.2 NAME	INVRA CASA		
STREET ADDRESS	63 BAY DRIVE BAY POINT		2.3 STREET ADDRESS	LAVRA, CASA 1800 ATLANTIC BLV	D. #1321	
CiTY-ST-ZiP	KEY WEST FL 33040		2. 4 CITY - ST-ZIP	KEY WEST FL. 3.	3040	
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP		TT 25/252	3.4. CITY-ST-2IP		100	
TITLE		L DELETE	4.1 TITLE	Į.	☐ Change ☐ Addition	
NAME			4.2 NAME			
STREET ADORESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 C(TY - ST - Z(P) 5.1 T(TLE		Change Addition	
NAME		the property	5.2 NAME	<u> </u>		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - S1 - ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition	
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS	[
C(1Y-\$1-2IP	'		6.4 CITY - ST - ZIP			
information Lam an of	r indicated on this annual report or sur	pplementat annual report is ne receiver or trustee empo	true and accurate and wered to execute this	stated in Section 119.07(3)(i). Florida Statute d that my signature shall have the same legs report as required by Chapter 607, Florida S	al effect as if made under oath; that [

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FILED

May 21 1997 8:00am

Secretary of State