SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 97 AUG 20 AM 10: 38 DIVISION OF CORPORATIONS 1997 P93000012839 (5) **DOCUMENT #** SECRETARY OF STATE TALLAHASSEE, FLORIDA JB PAPERIE, INC. Principal Place of Business Mailing Address 1027 ANDALUSIA AVENUE 1027 ANDALUSIA AVENUE **CORAL GABLES FL 33134** CORAL GABLES FL 33134 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 02/18/1993 02/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0392434 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEHAR, JENNIFER 1027 ANDALUSIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 City 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. D TITLE DELETE 1.1 TITLE Change Addition BEHAR, JENNIFER NAM 1.2 NAME 1027 ANDALUSIA AVENUE STREET ADDRESS 1.3 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE 2 1 TITLE Addition TITLE BEHAR, LAWRENCE NAME 2.2 NAME 1027 ANDALUSIA AVENUE STREET ADDRESS 2.3 STREET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 000002275250---08/22/97--01105--015 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS <u>\*\*\*\*165.00</u> CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change TITLE 5.1 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE Change TITLE 61 TITLE Addition NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP 14. I do 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

fine stationery · invitations · custom design To whom it may concern-Sent a check (CK#1934) on 3/2/97 for \$165.00. I spoke with Jim in your office 7/97 he said 1 got this 2nd notice-Hat there was a problem in your office & to re-submit my payment. thank you Here it is

> Jennifer Belor President