

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

06-06-2001 90009 031 ***150.00

DOCUMENT # # P93000040682

1. Entity Name

MAX DISCOUNT PAPER & PACKAGING, INC.

Principal Place of Business Mailing Address
P.O. BOX 450705 P.O. BOX 450705
SUNRISE, FL 33345 SUNRISE, FL 33345
12735 NW 15th St,

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Sunrise, FL

Zip Country Zip Country
33323 Broward

4. FEI Number Applied For
65-0424023 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HEFTER, MAX
P.O. BOX 450705
SUNRISE, FL 33345
12735 NW 15th St
Sunrise, FL
33323

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 AGENT 05-14-01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to: Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

1. OFFICERS AND DIRECTORS	
1. NAME	2. TITLE
HEFTER, MAX	
3. STREET ADDRESS	4. CITY-STATE-ZIP
SAME AS ABOVE	
5. Y-STATE-ZIP	
6. DELETE	
7. NAME	8. TITLE
9. STREET ADDRESS	10. CITY-STATE-ZIP
11. Y-STATE-ZIP	
12. DELETE	
13. NAME	14. TITLE
15. STREET ADDRESS	16. CITY-STATE-ZIP
17. Y-STATE-ZIP	
18. DELETE	
19. NAME	20. TITLE
21. STREET ADDRESS	22. CITY-STATE-ZIP
23. Y-STATE-ZIP	
24. DELETE	
25. NAME	26. TITLE
27. STREET ADDRESS	28. CITY-STATE-ZIP
29. Y-STATE-ZIP	
30. DELETE	
31. NAME	32. TITLE
33. STREET ADDRESS	34. CITY-STATE-ZIP
35. Y-STATE-ZIP	
36. DELETE	
37. NAME	38. TITLE
39. STREET ADDRESS	40. CITY-STATE-ZIP
41. Y-STATE-ZIP	
42. DELETE	
43. NAME	44. TITLE
45. STREET ADDRESS	46. CITY-STATE-ZIP
47. Y-STATE-ZIP	
48. DELETE	
49. NAME	50. TITLE
51. STREET ADDRESS	52. CITY-STATE-ZIP
53. Y-STATE-ZIP	
54. DELETE	
55. NAME	56. TITLE
57. STREET ADDRESS	58. CITY-STATE-ZIP
59. Y-STATE-ZIP	
60. DELETE	
61. NAME	62. TITLE
63. STREET ADDRESS	64. CITY-STATE-ZIP
65. Y-STATE-ZIP	
66. DELETE	
67. NAME	68. TITLE
69. STREET ADDRESS	70. CITY-STATE-ZIP
71. Y-STATE-ZIP	
72. DELETE	
73. NAME	74. TITLE
75. STREET ADDRESS	76. CITY-STATE-ZIP
77. Y-STATE-ZIP	
78. DELETE	
79. NAME	80. TITLE
81. STREET ADDRESS	82. CITY-STATE-ZIP
83. Y-STATE-ZIP	
84. DELETE	
85. NAME	86. TITLE
87. STREET ADDRESS	88. CITY-STATE-ZIP
89. Y-STATE-ZIP	
90. DELETE	
91. NAME	92. TITLE
93. STREET ADDRESS	94. CITY-STATE-ZIP
95. Y-STATE-ZIP	
96. DELETE	
97. NAME	98. TITLE
99. STREET ADDRESS	100. CITY-STATE-ZIP
101. Y-STATE-ZIP	
102. DELETE	
103. NAME	104. TITLE
105. STREET ADDRESS	106. CITY-STATE-ZIP
107. Y-STATE-ZIP	
108. DELETE	
109. NAME	110. TITLE
111. STREET ADDRESS	112. CITY-STATE-ZIP
113. Y-STATE-ZIP	
114. DELETE	
115. NAME	116. TITLE
117. STREET ADDRESS	118. CITY-STATE-ZIP
119. Y-STATE-ZIP	
120. DELETE	
121. NAME	122. TITLE
123. STREET ADDRESS	124. CITY-STATE-ZIP
125. Y-STATE-ZIP	
126. DELETE	
127. NAME	128. TITLE
129. STREET ADDRESS	130. CITY-STATE-ZIP
131. Y-STATE-ZIP	
132. DELETE	
133. NAME	134. TITLE
135. STREET ADDRESS	136. CITY-STATE-ZIP
137. Y-STATE-ZIP	
138. DELETE	
139. NAME	140. TITLE
141. STREET ADDRESS	142. CITY-STATE-ZIP
143. Y-STATE-ZIP	
144. DELETE	
145. NAME	146. TITLE
147. STREET ADDRESS	148. CITY-STATE-ZIP
149. Y-STATE-ZIP	
150. DELETE	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
1. NAME	2. TITLE
3. STREET ADDRESS	4. CITY-STATE-ZIP
5. Y-STATE-ZIP	
6. DELETE	
7. NAME	8. TITLE
9. STREET ADDRESS	10. CITY-STATE-ZIP
11. Y-STATE-ZIP	
12. DELETE	
13. NAME	14. TITLE
15. STREET ADDRESS	16. CITY-STATE-ZIP
17. Y-STATE-ZIP	
18. DELETE	
19. NAME	20. TITLE
21. STREET ADDRESS	22. CITY-STATE-ZIP
23. Y-STATE-ZIP	
24. DELETE	
25. NAME	26. TITLE
27. STREET ADDRESS	28. CITY-STATE-ZIP
29. Y-STATE-ZIP	
30. DELETE	
31. NAME	32. TITLE
33. STREET ADDRESS	34. CITY-STATE-ZIP
35. Y-STATE-ZIP	
36. DELETE	
37. NAME	38. TITLE
39. STREET ADDRESS	40. CITY-STATE-ZIP
41. Y-STATE-ZIP	
42. DELETE	
43. NAME	44. TITLE
45. STREET ADDRESS	46. CITY-STATE-ZIP
47. Y-STATE-ZIP	
48. DELETE	
49. NAME	50. TITLE
51. STREET ADDRESS	52. CITY-STATE-ZIP
53. Y-STATE-ZIP	
54. DELETE	
55. NAME	56. TITLE
57. STREET ADDRESS	58. CITY-STATE-ZIP
59. Y-STATE-ZIP	
60. DELETE	
61. NAME	62. TITLE
63. STREET ADDRESS	64. CITY-STATE-ZIP
65. Y-STATE-ZIP	
66. DELETE	
67. NAME	68. TITLE
69. STREET ADDRESS	70. CITY-STATE-ZIP
71. Y-STATE-ZIP	
72. DELETE	
73. NAME	74. TITLE
75. STREET ADDRESS	76. CITY-STATE-ZIP
77. Y-STATE-ZIP	
78. DELETE	
79. NAME	80. TITLE
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83. Y-STATE-ZIP	
84. DELETE	
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89. Y-STATE-ZIP	
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95. Y-STATE-ZIP	
96. DELETE	
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101. Y-STATE-ZIP	
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143. Y-STATE-ZIP	
144. DELETE	
145. NAME	146. TITLE
147. STREET ADDRESS	148. CITY-STATE-ZIP
149. Y-STATE-ZIP	
150. DELETE	

I 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PRESIDENT 05-14-01 (954) 553-0909
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/00)