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

NAME

STREET ADDRESS

CITY-S1-ZIP

FILED Apr 21 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000013609 (9) BUSH PAPER HANGING, INC. Principal Place of Business Mailing Address 334 CERVIDAE DR. 334 CERVIDAC DR. APOPKA FL 32703 APOPKA FL 32703 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/16/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 534 CRVI dae DX 21 59-3299655 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 30 USA Personal Property Tax due June 30. 25 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BUSH, DEANNA J 334 CERVODAE DR. 82 Street Address (P.O. Box Number is Not Acceptable) **ALTAMONTE SPRINGS FL 32703** 83 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 registored 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 50, Sec Just SIGNATURE if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE. Change Addition TITLE 1.1 TITLE BUSH, DEANNA J NAME 1.2 NAME 334 CERVIDAE DR. STREET ADDRESS 1.3 STREET ADDRESS ALTAMONTE SPRINGS FL CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TELE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-7IP 5.4 City-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

14. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address. 407 8140427 4-14-98 1100 SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS