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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000006896 (0)

UNIQUE PAPER CREATIONS, INC.

FILED Apr 24 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 4698 N.W. 103RD AVE. SUNRISE FL 33351 4698 N.W. 103RD AVE. SUNRISE FL 33351 500000000000000000000000000000000								
					3. Date Incorporated or Qualified 01/19/1996	d Sa. Da	ate of Las	t Report
	ace of Business 41 NW 11 PCA	2a. Mailing Address £ 26 //84/ NC	1 1/4	Rece	4. FEI Number			Applied For Not Applicable
Suite, Apt i		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.7	5 Additional Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be	
Zip _	Country Country	Zip	Country		Trust Fund Contribution 8. This corporation has tiability for		tax unde	r s. 199.032,
<u> </u>	0 7 / 25		30		Florida Statutes	Yes [
	9. Name and Address of Curre	ini negistered Agent	81	Name	10. Name and Address of New	registered.	Agent	<u>,</u>
	ENE, WILLIAM		["	I Wallie	· · · ·			
4698 N.W. 103RD AVE. SUNRISE FL 33351			82 83	Street Addr	ress (P.O. Box Number is Not Accep	table)		
			83					
			84	City		FI	85 Z	p Code
1. Pursuani t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the abovi	e-named corp	poration submits this statement for th	e purpose o	f changin	g its registered
office or re agent if ar	n the provisions of Sections 607.05 egistered agent, or both, in the Statin familiar with, and accept the oblig	gations of, Section 607.0505, Flor	ida Statutes	7 trie corporat S.	libri's poard or directors. Thereby acc	p: upp		
IGNATURE .	Signature, typed or product name of registered as	joint and tills if applicable (NOTE			red when reinstating) ADDITIONS/CHANGES TO OF	DATE		
IGNATURE	Signature, typed or product name of registered as		Registered Age		red when reinstating)	DATE		ORS IN 12
IGNATURE	Signature, typest or product name of registered as OFFICERS AN D SUSSNOW, BELLE	gent and tills if applicable (NOTE ND DIRECTORS	Registered Age		red when reinstating)	DATE	DIRECT	ORS IN 12
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amornator indicated on this annual report of supplemental annual report is due and accurate and that my signature shall nave the same legal effect as it made under of a man 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.