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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000045802 (1)

PAPER LEAF ENTERPRISES, CORP

1111 1211 12		, 11				1 1803/000 INC HONDO CHILL BONI ABANI ABANI BONI BIRRI BIRRI BANI HUW BARR JIRI HON
Principal Place	of Business	Mailing Ac	ddroee			
9150 W ATLANT		· ·	LANTIC #1713			
CORAL SPRING			RINGS FL 33071-	-5230		
						3. Date Incorporated or Qualified 3a. Date of Last Report 05/30/1996
	ace of Business	-	2a. Mailing Address			4. FEI Number Applied For Applied For
21 Suite, Apt #	H ata		Suite, Apt. #, etc			65-0668587 Applied For Not Applicable
22	r, ea	27	 			5. Certificate of Status Desired
City & State			City & State			Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution
Zip	Zip Country Zip		D Country		1	8. This corporation has liability for intangible tax under s. 199.032,
24	25	25 29 30 Name and Address of Current Registered Agent			Florida Statutes	
A1141	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	rent Registered A	gent	81	Name	10. Name and Address of New Registered Agent
	NIPA, GUSTAVO			[0]	1,144,114	
	W ATLANTIC #1713		82 Street Add			ddress (P.O. Box Number is Not Acceptable)
CORAL SPRINGS FL 33071			83			
					·	
				84		FL 85 Zip Code
11. Pursuant to office or re	o the provisions of Sections 607.0	502 and 607.1508 ste of Florida, Such	i, Florida Statute	s, the abov	e-named o	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent Lan	ri familiar with, and accept the ob	ligations of, Sectio	n 607.0505, Flo	rida Statute	\$.	Additions board of directions. This copy accept the appointment as registered
SIGNATURE	gusy.					1/8/9/
12.	/	argent and Me if applican AND DIRECTORS	e (NOIE	13.	ent signature re	aguired when reinstating) /DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE	1.1 TITLE	10	President Change Addition
NAME				1.2 NAME		CALLO GUBONA
STREET ADDRESS				1.3 STREET	LADORESS 4	ILSO W. MITMING DIVOL " " "
CHY-ST-ZIP				1.4 CITY-3	ST-ZIP (coral splings, $f(3307)$
TITLE	DELETE			2.1 TITLE	-	vice - Plesident Change Addition
NAME				2.2 NAME		Soraya palis 1150 W. Atlantic Blud # 1713
STREET ADDRESS					FADDRESS	1150 W. 171171110 DIVO H 1112
CITY - ST - ZIP			2.4 GITY -	ST-ZIP	coral spanes, fl 33071	
TITLE.			L'I NETE IE	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS					ADDRESS	
CULT ST SIE				3.4. CITY-		
TITLE			DELETE	4.1 TITLE	31-28	☐ Change ☐ Addition
NAME				4, 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY - ST - ZIP				4.4 CITY - \$	ST-ZIP	
TITLE			☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREE	ADDRESS	,
CITY ST ZIP			DELETE	5.4 CITY-5	ST-ZIP	
TITLE			DELETE	6.1 TITLE		Change Addition
NAME CIDIET AMOUNT OF				6.2 NAME	ADDOCCO	
STREET ADDRESS					ADDRESS	
14. I do hereb	y certify that the information succ	lied with this filing	does not qualify	6.4 CITY - 3		sted in Section 119.07(3)(i), Florida Statutes. I further certify that the
intormation Lam an off	i indicated on this annual report o	or supplemental an For the receiver or	inual report is tri trustee empowe	ue and acci ered to exec	urate and t	hat my signature shall have the same legal effect as if made under oath; that port as required by Chapter 607, Florida Statutes; and that my name