FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 03 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 # P96000070754 (2) B.O.P.P. CONVERTING CORP. Principal Place of Business Mailing Address 7922 N 67TH ST 7922 N 67TH ST MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1996 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 7924 N.W. 67 St 21 7924 H.W. 67 Not Applicable 65-0716783 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional X 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI Added to Fees MIAM J. ORIDA Trust Fund Contribution TORIDA. 8. This corporation owes or has paid the current year Intangible 33166 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LOPEZ, JUAN P JUAN P. LOPEZ Idress (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number 7922 N 67TH ST 62 7924 **MIAMI FL 33166** 75+ 83 City Mypay 607.15.08, Florida Statules, the above-named corporation's ubmits this statement for the purpose of changing its registered of Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of hection 607.9505, Florida Statutes. 84 Pursuant to the provisions of Sections office or registered agent, or both agent. I am familiar with, and nec (N(x1E_Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE LOPEZ, JUAN P 1.2 NAME NAME 7922 N 67TH ST 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3 2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-S1-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP

4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and a officer or director of the corporation or the receiver or furstice supported Block 12 or Block 13 if changed, or on an althorhum with an address. the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under eath; that I am an accute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5.1 TITLE

52 NAME

6.1 TITLE

5.3 STREET ADDRESS 5.4 City - ST - ZIP

6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

TITLE

NAME

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

2-2098

Change

☐ Change

Addition

Addition