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

PROFIT **CORPORATION** ANNUAL REPORT

1998



HI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000003741 (0)

FILED

98 JUN -5 PM 3: 28

SECRETARY OF STATE

CARNIVAL PAPER INTERNATIONAL, INC.			IALLMIMOULL
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Principal Place of Business	Mailing Address		
7840 CAMINO REAL, SUITE P-101	7840 CAMINO REAL, SUIT	E P-101	
MIAMI FL 33143	MIAM) FL 33143		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			01/14/1997
2. Principal Place of Business	2a. Mailing Address		4 FFI Number Y Applied For
21 7840 <b>Ca</b> mino real 26			65-0726983 Not Applicable
Suite, Apt. # alc	Suita Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
[22]	27		Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
[23]	28	Country	Trust Fund Contribution Added to Fees
Zip Country 25 Country 25	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24 33143 25 Name and Address of	29 : : Current Registered Agent	30	10. Name and Address of New Registered Agent
AMENIATION AVENUE			MONICA HOLLMAN
CORAL GABLES FL 33134		82 Street Add	78840 Camino Lis NotAcceptable)
COTTAL CABLES IE 00104		83 6	Suite P- 101
,			
			Miami <b>FL</b>   85   23   243
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			
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 registered agent, or both on 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 family with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Neucle		VSD	04.20.98
Signatur Types Lor printed flame of reg	HONICA HOUMAN (NOTE: Store or agent and trick if apple able (NOTE:	Registered Agent signature requir	red when reinstating) DATE
	FRS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PTD	☐ DELETE	•	PTD Change Addition
NAME MORAN, MONICA		1.2 NAME	CARVAJAL, RICARDO
STREET ADDRESS 7840 CAMINO REAL, SUITE P-101		1.3 STREET ADDRESS	7840 CAMINO REAL, SUITE P- 101
CITY-ST-ZIP MIAMI FL 33143	T DELAY.	1.9 0(1) 01 20	FL.33143
TITLE VSD	DETELE	21 TITLE F	HOLLMAN, MONICA
NAME CARVAJAL, RICARDO	NUITE D 404		7840 CAMINO REAL, SUITE P- 101
STREET ADDRESS 7840 CAMINO REAL, SUITE P-101 MIAMI FL 33143			MIAMI FL 33143
Olitical En	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	Change Addition
TITLE	E wait	3.2 NAME	
NAME ANDERT ADDOLOG		1	
STREET ADDRESS		3.3 STREET ADDRESS 3.4. City - St - Zip	8000025527187 
CITY-ST-ZIP	DELETE	4.1 1/1LE	- U5/U5/33U1135U14 Addition
NAME		4. 2 NAME	****150.00 \*****150.00
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME 1		5.2 NAME	
STREET ADORESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY - ST - ZIP	
TITLE	DELFTE	6.1 TALE	Change Addition
NAME		6.2 NAME	<b>a</b>
STREET ADDRESS		6.3 STREET ADDRESS	
1 4		5 4 0 TV 0T 7:0	/ W <sup>*</sup>

14. Thereby 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 animal 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 impowered 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 of an attachment with an indirector.