2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000021649

1. Entity Name
SOUTHERN PAPER, INC.

Principal Place of Business	Mailing Address
9103 NW 105TH CIRCLE	9103 NW 105TH CIRCLE
MEDLEY, FL 33178 US	MEDLEY, FL 33178 US

DO NOT WRITE IN THIS SPACE

02122004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0740269	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRANQUIZ, MIGUEL
9103 NW 105TH CIRCLE
MEDLEY, FL 33178

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000055400 02/17/04-80036-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FRANQUIZ, MIGUEL
STREET ADDRESS	9103 NW 105TH CIRCLE
CITY-ST-ZIP	MEDLEY, FL 33178

TITLE	VD
NAME	FRANQUIZ, JENNY J
STREET ADDRESS	9103 NW 105TH CIRCLE
CITY-ST-ZIP	MEDLEY, FL 33178

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Jenny Franquiz_   3/12/4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #