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Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000060731

1. Corporation Name
Paper King Inc.

Principal Place of Business
1210 Sarah Ave
Longwood Fla.
32750

Mailing Address
1210 Sarah Ave
Longwood Fla
32750

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/12/97

2. Principal Place of Business
21 1210 Sarah st
22 Suite, Apt. #, etc.
23 City & State Longwood, Fla
24 Zip 32750
25 Country USA

2a. Mailing Address
26 1210 Sarah st
27 Suite, Apt. #, etc.
28 City & State Longwood, Fla
29 Zip 32750
30 Country USA

4. FEI Number 59-3507182 — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
Sides, Sam
2400 Sunrise Lake Drive West
Suite 112
Sunrise Fla 33322

10. Name and Address of New Registered Agent
81 Name Ira Turetsky
82 Street Address (P.O. Box Number is Not Acceptable) 505 Keesamo Way
83 Lake Mary
84 City FL 85 Zip Code 32746

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in 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 familiar with the duties and responsibilities of Section 607.0505, Florida Statutes.

SIGNATURE Ira Turetsky (Signature of Officer or Director of the Corporation or Registered Agent) (NOTE: Registered Agent signature required when reinstating) DATE 5/18/98

12. OFFICERS AND DIRECTORS

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President ☑ Change ☐ Addition
1.2 NAME	Ira Turetsky
1.3 STREET ADDRESS	505 Keesamo Way
1.4 CITY-ST-ZIP	Lake Mary, Fla. 32746
2.1 TITLE	Secy ☐ Change ☑ Addition
2.2 NAME	Robin Turetsky
2.3 STREET ADDRESS	505 Keesamo Way
2.4 CITY-ST-ZIP	Lake Mary Fla 32746
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	600002550926
4.4 CITY-ST-ZIP	-06/08/98--01041--042
5.1 TITLE	***150.00 ☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or is entered in Block 12 with an address.

SIGNATURE: Ira Turetsky Ira Turetsky - Pres 4/19/98 407-834-8600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #