## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 16, 2001 8:00 am<sup>5</sup> Secretary of State DOCHMENT # P98000078471 1. Entity Name 05-16-2001 90055 046 \*\*\*150.00 PAPELCO INTERNATIONAL, INC. Principal Place of Business Mailing Address 8012 NW 29TH STREET 8012 NW 29TH STREET MIAMI FL 33122-1077 MIAMI FL 33122-1077 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0870319 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, CARLOS E Street Address (P.O. Box Number is Not Acceptable) 8012 NW 29TH STREET MIAMI FL 33122-1077 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE ☐ Delete TITLE Change NAME RODRIGUEZ, CARLOS ENRIQUE NAME STREET ADDRESS 8012 NW 29TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122-1077 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition RODRIGUEZ, CARLOS E STREET ADDRESS 8012 NW 29TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33122-1077 TITLE ☐ Defete TITLE ☐ Change . ☐ Addition RODRIGUEZ, JULIO E NAME NAME STREET ADDRESS 8012 NW 29 STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122-1077 CITY-ST-7IP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 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 11 or Block 12 if changed, or on an attachment v with all other like empowered

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

JUGO E. RODAIQUEZ PresiDENT

FILED