

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**FIL**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE

FILED  
Sandra B. Marham  
Secretary of State  
DIVISION OF CORPORATIONS

PW 3-40 95 JAN 26

DOCUMENT # V05020

(5)

SECRETARY OF STATE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA TALLAHASSEE, FLORIDA

1. Corporation Name  
**UNION RAG WAREHOUSE, INC.**

Principal Place of Business

5703 NW 35TH AVE  
MIAMI FL

Mailing Address

5703 NW 35TH AVE  
MIAMI FL

2. Principal Place of Business

21 Built, Apt. #, etc.

25 Mailing Address

26 Built, Apt. #, etc.

22 City & State

23 Zip

27 City & State

28 Zip

24 Country

29 Country

30 Zip

9. Name and Address of Current Registered Agent

HERNANDEZ, ARTURO  
5701 NW 35TH AVE  
MIAMI FL

3. Date Incorporated or Organized <b>01/08/1992</b>	3a. Date of Last Report <b>01/24/1994</b>
4. FEI Number <b>65-0313865</b>	4b. Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	5a. \$0.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	6a. \$5.00 May Be Added to Fees <input type="checkbox"/>
7. This corporation has liability for Intangible Tax under §. 100.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

01 Name	05 Zip Code
02 Street Address (P.O. Box Number Is Not Acceptable)	
03	
04 City	FL

11. Pursuant to the provisions of Sections 007.0502 and 007.1800, 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, and accept the obligations of, Section 007.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(Note: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, ARTURO	12 NAME	
STREET ADDRESS	5701 NW 35TH AVE	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	
TITLE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1 (o)(7)(g)(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 unempowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

INDIVIDUAL AND ENTITLED TO SIGN THIS DOCUMENT ON BEHALF OF THE CORPORATION OR ASSOCIATION

Americo Hernandez

1-20-95

Date

0101380 CP