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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V22280

SWEET PAPER REALTY CORP.

## **FILED** Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 215 W TOTH AVE. HIALEAH FL 33010 215 8.W) 10TH AVE. HIALEAH FL 33010 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/19/1992 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 215 5E Suite, Apt. #, etc. 215 SE 65-0319550 Not Applicable Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes ∏ No. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SCHECK, JEFFREY 215 S.E. 10TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 83 85 Zip Code 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, 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 THUE **SCHECK, MICHAEL** NAME 1.2 NAME 215 S.E. 10TH AVE. STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **\$CHECK, RAQUEL** NAME 2.2 NAME 215 S.E. 10TH AVE STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE **SCHECK, JEFFREY** NAME 3.2 NAME 215 S.E. 10TH AVE. STREET ADDRESS 3.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE SCHECK, MARTIN NAME 4. 2 NAME 215 S.E. 10TH AVE. STREET ADDRESS 4.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE SCHECK, Stever SCHOCK, STEVEN NAME 5.2 NAME 215 SE 10TH AVE 5.3 STREET ADDRESS STREET ADDRESS HiAleAH FL 33010 HIALEAH FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing does not quality 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 enough 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 of the receiver or hystec empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attachment with an artifices.