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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 07 1997 8:00am

Secretary of State

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DIVISION OF CORPORATIONS

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(9)

PAPER MASTER OF CENTRAL FLORIDA, INC.

Principal Place of Business Mailing Address 7800 CURRENCY DR 4880 N.W. 157TH ST. MIAMI LAKES FL 33014-6434 ORLANDO FL 32809 3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1992 10/14/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 7500 CURRENCY DR 21 65-0335599 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be ORLA 23 28 Trust Fund Contribution Added to Fees Country ZiD Country This corporation has liability for intangible tax under s. 199.032, SA 24 25 30 Florida Statutes 🔀 Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FIDUCCIA, JAMES 11281 RENAISSANAE RD. Street Address (P.O. Box Number is Not Acceptable) 62 COOPER CITY FL 33026 83 11. Pursuant to the pmy signy 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, for both, in the State of General Suprinchange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am langillar with and accept the collegations of property of 607.0505, Florida Statutes. SIGNAT (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TITLE 1.1 TITLE Change Addition FIDUCCIA, JAMES NAME 1.2 NAME 11281 RENAISSANCE RD STREET ADDRESS 1.3 STREET ADDRESS COOPER CITY FL CITY-S1-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition TURETSKY, SIDNEY MAME 2.2 NAME 14915 ENCINO CIR N STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL CITY: ST: ZIF 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition TURETSKY, IRA NAME 3.2 NAME 1941 NW 180 WAY STREET ADDRESS 3.3 STREET ADDRESS PEMBROKE PINES FL CHY: ST: ZIF 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST ZiE 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS Offrist 7P 5.4 CITY - ST - ZIP DELETE THILE 6.1 TITLE Channe Addition NAME 6.2 NAME STREET AUDRESS. 6.3 STREET ADDRESS CITY: ST-Zin 6.4 CITY - ST - ZIP

14. I do he by 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 any dat 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 this corporation or the receiver or trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name