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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

ARK PAPER & LIGHTING, INC.

FILED Apr 29 1998 8:00am Secretary of State



| ### Ago No 240 b 51. ### OCRAL SPRINGS FL 33071 ### Ago No 240 M 240 b 51. ### CORAL SPRINGS FL 33071 ### Ago No 240 M 240 b 51. ### CORAL SPRINGS FL 33071 ### Ago No 240 M 240 b 51. ### Ago No 240 M 240 | | | | | | | | | | | |
|--|-------------------------------|---|--|--|---|---------------------------|-------------|--|--|-------------|--------------|
| CORAL SPRINGS FL 33071 2. Principal Place of Business 2. Mailling Address 2. Mailling Address 3. Date Incorporated or Qualified OS/22/1982 3. Date Incorporated OS/22/1982 3. Date Incorporated OS/22/1982 3. Date Incorporated OS/22/1982 3. Date Incorporate OS/22/1982 3. Date Incorporated OS/22/1982 3. Date I | Principal F | Place of Business | Mailing | Mailing Address | | | | - I SABAL DEFEND OTHER ORDER OTHER DISTRIBUTION OF BEING DEFINED | | OU TIEN IND | |
| 2. Principal Piace of Businoss | 9320 NW 2ND ST. 9320 NW 2ND S | | | | | FL 33071 | | | DO NOT WRITE IN THIS SPA | CE | |
| 2. Principal Piace of Business 2a. Mailing Address 4. FEL Number Applied Formal App | | | | | | | | | | | |
| Applied For Solida Place of Business 2a | | | | | | | | | | | |
| Sulc. Apt. 4, etc. 27 City & State City & State 28 City & State 29 Country 20 Country 2 | 2. Princip | al Place of Busines | ss | 2a. Maili | 2a. Mailing Address | | | | | Ap | plied For |
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| City & State 238 Zip | | Apt. #, etc. | | ——¬ | | | | | 5. Certificate of Status Desired | | |
| Zip Country Zip Country Siphian Country Zip Country Siphian Country Zip | | State | | | ···· | | | | 6. Flection Campaign Financipo | \$5.00 | May Ro |
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| Section Sect | | | Country | Zφ | | Cour | ılry | | 8. This corporation owes or has paid the curren | year Int | angible |
| EDELSON, KERRI 9320 NW 2ND ST. CORAL SPRINGS,F L 33071 82 Sirect Address (P.O. Box Number is Not Acceptable) 83 Ball Sirect Address (P.O. Box Number is Not Acceptable) 84 City | 24 | | | | | 30 | | | | | No |
| 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL B5 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 agent, and facility in the State of Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and facility in and accept the obligations of Section 607.0506, Florida Statutes. SIGNATURE Signature, ipped or present name of ingle front and its except title. (NOT Registered Agent signature inquired when remissative) 12. Of FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D D LEETE 11.1TILE DAME STREET ADDRESS 9320 NW 2ND ST. 1.3 STREET ADDRESS 13.4 STREET ADDRESS 13.5 STREET ADDRESS | | | | ent Registered | Agent | | 01 | Name | 10. Name and Address of New Registered Ago | nt | |
| CORAL SPRINGS,F L 33071 B3 | | | | | | Ľ | | INATHO | | _ | |
| B3 B4 City | | | | | | [1 | B2 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | |
| ### City | | CUHAL SPRIN | 199'L 330' I | | | h | 83 | | | | |
| 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 agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Total | | | | | | Ľ | | | | | |
| office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE SIGNAT | | | | | | 1 | 84 | City | Fi | 5 Zip (| Code |
| agent. Fam familiar with, and accept the obligations of, Section 607 0505, Florida Statute's. SIGNATURE Signature, typed or podere name of registered aspect amount of displacable. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS IN 12. TITLE D DELETE 1.1 TITLE BDELSON, KERRI 1.2 NAME STREET ADDRESS 9320 NW 2ND ST. CORAL SPRINGS FL 1.4 CITY-ST-ZIP TITLE D DELETE 2.1 TITLE DELETE 2.2 NAME STREET ADDRESS 13990 OAK RIDGE DR. CITY-ST-ZIP DAVIE FL 2.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DAVIE FL Change Addition NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DAVIE FL Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME CITY-ST-ZIP TITLE CHANGE ADDRESS CITY-S | 11. Pursu | ant to the provision | ns of Sections 607.0 | 502 and 607.150 | 08, Florida Statu | tes, the ab | ove | -named corp | oration submits this statement for the purpose of ch | anging its | s registered |
| Signature injusted to protect name of right three august are it explainable ROSE Registered Agord signature required when remistaling) DATE | office agent | or registe red ager . I am lamiliar with, | nt, or both, in the Sta , and accept the ob | ite of Florida. Su ligations of, Sect | ch change was ion 607.05 05, Fl | authorized orida Stalu | by ites. | the corporati | ion's board of directors. I hereby accept the appoin | ment as | registered |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D DELETE 1.1 TITLE NAME STREET ADDRESS CITY- ST-ZIP CORAL SPRINGS FL 1.3 STREET ADDRESS CITY- ST-ZIP TITLE D DELETE 2.1 TITLE 2.2 NAME 2.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DAVIE FL DELETE DELETE 3.1 TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE DELETE Addition Addition Change Addition Addition Change Addition Addition Addition Addition Addition Change Addition Addition Addition Addition Change Addition Addition Addition Change Addition Addition Addition Change Addition Addition Addition Addition Addition Change Addition Addition Addition Change Addition | SIGNATUR | RE | | | | | | | | | |
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of to execute this report as required by Chapter 607, Florida Statute