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

PROFIT, CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V49692 1. Corporation Name

EDWARDS PAPER COMPANY, INC.

								//Bij Bibij Bižil Bibii !		
Principal Plac	e of Busines	ss .	Mailing Add	ress						
3775 N.W. 77TH ST 3775 N.W. 77TH ST							1			
			MIAMI FL 33147			,	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
			บร	us						
				•			· ·			
20 Matter Addition							07/09/1992			
2. Principal Place of Business			~	2a. Mailing Address			4. FEI Number	⊢	plied For	
1			26				65-0351236		t Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75		
22				27				Fee Re		
City & State				City & State			6. Election Campaign Financing \$5.00 May Be			
23				28			Trust Fund Contribution Added to Fees			
Zip	Country		Zip	Zip Count			a. The corporation of the tanking and			
24		25	29	30			Personal Property Tax.		-□No [;]	
	9. Nam	and Address of Currer	nt Registered Ag	ent		,	10. Name and Address of New Registe	red Agent		
			•		81	Name				
FLORES, JACQUELINE					82 Street Address (P.O. Box Number is Not Acceptable)			 -		
	5 N.W. 77				, dz Stiest Addi		reas (F.O. DOX Hamber is Not Accopuse)			
MIA	MI_FL 3314	17			83		11. 15 12. 12. 12. 12. 13. 13. 13. 13. 13. 13. 13. 13. 13. 13	Ti		
,								10. 6. 14.	7, 7 6 6	
					84	City		FL 85 Zip (Code ''	
44.5			22 207 4500	Clarida Statutas d	ho abov	nomed core	poration submits this statement for the purpos	-	registered	
office or i	renistered a	ent or both in the State.	of Florida, Such of	change was autho	rized by	the corporate	on's board of directors. I hereby accept the a	ippointment as re	gistered	
ii: agent. I a	am familiar v	ith, and accept the obliga	ations of, Section	607.0505, Florida	Statutes					
SIGNATURE	,									
	Signature, type	d or printed name of registered age				nt signature require	ADDITIONS/CHANGES TO OFFICER		DC IN 12	
12.	DT	OFFICERS AN	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER	Change	Addition	
TITLE	PT	-		☐ DELETE	1.1 TITLE	1		☐ Change		
NAME		, eduardo		1	1.2 NAME					
STREET ADDRESS	1	W. 148 ST		I.	1.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI F	L 33158		ji.	1.4 CITY-S	T-ZIP				
TITLE	V	¥		DELETE	2.1 TITLE			☐ Change	☐ Addition	
NAME	CAREAG	ia, mirtha	÷	•	2.2 NAME			1		
STREET ADDRESS	7000 01	N. 148 ST			2.3 STREE	TADDRESS			•	
CITY-ST-ZĪP	MIAMI F				2. 4 CITY-5	ST-79P		,		
TITLE	1 4	St. Control of	-		3.1 TITLE			☐ Change	☐ Addition	
NAME		JACQUELINE			3.2 NAME					
137	7000 01	W. 148 ST				TADDRESS	••	3.7		
STREET ADDRESS	بيدة ومناها					į				
CITY-ST-ZIP	MIAMI F	L 33 130			3.4. CITY-8	51-ZIP		Chance	Addition	
TITLE			•		4.1 TTTLE	.		, L. J Gridingo		
NAME	\·\;	•			4. 2 NAME					
STREET ADDRESS	6].				4.3 STREE	TADORESS		•	-	
CITY-ST-ZIP	<u> </u>	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			4.4 CITY-S	T-ZIP	· .		F-1' & 1 00	
TITLE					5.1 TITLE		. ~.	☐ Change	☐ Addition	
NAME	,		,	1	5.2 NAME			j., 🛊 🗓 .		
STREET ADDRESS	s			ŀ	5.3 STREE	T ADDRESS				
CITY-ST-ZIP	177			i i	5.4 CITY-S	T-ZIP		•		
TITLE	Trust in the	STATE OF THE STATE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME	17206.01				6.2 NAME					
CTDEET ANNDESS	(A. 4)				63 STREE	TADDRESS		,		

CITY-ST-ZIP 14. I hereby 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 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 empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90026 044 ***158.75