

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F74632

FILED  
Jan 15, 2006  
Secretary of State

Entity Name: PACKING INDUSTRY EQUIPMENT, INC.

## Current Principal Place of Business:

7020 SW 109TH TERRACE  
MIAMI, FL 331563966 US

## New Principal Place of Business:

## Current Mailing Address:

7020 SW 109TH TERRACE  
MIAMI, FL 331563966 US

## New Mailing Address:

FEI Number: 59-2191923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, ANNEMARIE  
7020 SW 109 TERR  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: THOMAS, NORMAN V  
Address: 7020 SW 109 TERR.  
City-St-Zip: MIAMI, FL 33156 US

Title: TD ( ) Delete  
Name: THOMAS, ANNEMARIE  
Address: 7020 SW 109 TERR  
City-St-Zip: MIAMI, FL 33156 US

Title: VD ( ) Delete  
Name: THOMAS, ANAMARIA  
Address: 7020 SW 109 TERR  
City-St-Zip: MIAMI, FL 33156 US

Title: D ( ) Delete  
Name: TORRES, JUAN EDUARDO  
Address: 600 BILTMORE WAY, APT. 1120  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D ( ) Delete  
Name: MONAHAN, ROARK R  
Address: 9980 CENTRAL PARK BLVD, SUITE 214  
City-St-Zip: BOCA RATON, FL US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNEMARIE THOMAS

TD

01/15/2006

Electronic Signature of Signing Officer or Director

Date