2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000004235

Entity Name: ULTRA FLEX PACKAGING CORP.

FILED Feb 20, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: BROOKLYN, NY 11208 **Current Mailing Address: New Mailing Address:** 975 ESSEX ST BROOKLYN, NY 11208 FEI Number: 11-2327083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SMITH, ROBERT Name: Name: 975 ESSEX STREET Address: Address: City-St-Zip: BROOKLYN, NY 11208 City-St-Zip: Title: VΡ Title: (X) Delete () Change () Addition Name: SALERNO, ALFRED Name: 975 ESSEX ST. Address: Address: BROOKLYN, NY 11208 City-St-Zip: City-St-Zip: Title: Title: SD () Delete () Change () Addition ADDISON, TODD Name: Name: 975 ESSEX ST Address: Address: City-St-Zip: BROOKLYN, NY 11208 City-St-Zip: Title: () Delete Title: () Change () Addition FOX, ROBERTA Name: Name: Address: 975 ESSEX ST. Address: City-St-Zip: BROOKLYN, NY 11208 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: BLATT, ELI Name: 6 ROLLING DR Address: Address: BROOKVILLE, NY 11545 City-St-Zip: City-St-Zip: Title: VPD (X) Delete Title: () Change () Addition SALERNO, EUGENE Name: Name: Address: 228 HELMET DR Address: City-St-Zip: City-St-Zip: JERICHO, NY 11753

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SMITH ROBERT VP 02/20/2003