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Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. McGratham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K42367 (8)
1. Corporation Name
ALLSTATE PACKAGING PRODUCTS, INC.



Principal Place of Business: 2548 30TH AVENUE NORTH, 101 E KENNEDY BLVD #2500, ST. PETERSBURG FL 33713 US
Mailing Address: P.O. BOX 60425, 101 E KENNEDY BLVD #2500, ST. PETERSBURG FL 33784-0425 US

3. Date Incorporated or Qualified: 10/28/1988
3a. Date of Last Report: 03/25/1996
4. FEI Number: 59-2920147
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24)
2a. Mailing Address (25-30)

9. Name and Address of Current Registered Agent
SMITH, DARRELL C.
101 E KENNEDY BLVD #2500
#3140
TAMPA FL 33602

10. Name and Address of New Registered Agent
81 Name: DARREN A. RENNER
82 Street Address (P.O. Box Number is Not Acceptable): 2548 30th Ave. North
83
84 City: St. Petersburg FL 85 Zip Code: 33713

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.
SIGNATURE: Darrell A. Renner DATE: 4-2-97

12. OFFICERS AND DIRECTORS
TITLE: DVT
NAME: RENNER, KAREN J
STREET ADDRESS: 2548 30TH AVENUE NORTH
CITY - ST - ZIP: ST. PETERSBURG FL
TITLE: DPS
NAME: RENNER, DARRELL A.
STREET ADDRESS: 2548 30TH AVENUE NORTH
CITY - ST - ZIP: ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE: Darrell A. Renner DATE: 3-17-97 DAYTIME PHONE #: 813/895-7676

CR2E034 (9/96)