

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058893

FILED  
Mar 26, 2007  
Secretary of State

Entity Name: BRUNI GLASS PACKAGING, INC.

**Current Principal Place of Business:**

2 SOUTH BISCAYNE BLVD., SUITE 3400  
MIAMI, FL 33131

**New Principal Place of Business:**

2 SOUTH BISCAYNE BLVD.  
SUITE 3400  
MIAMI, FL 33131

**Current Mailing Address:**

2 SOUTH BISCAYNE BLVD., SUITE 3400  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-1021332

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GY CORPORATE SERVICES, INC.  
2 SOUTH BISCAYNE BLVD., SUITE 3400  
MIAMI, FL 33131 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: DCEO ( ) Delete  
Name: DEL BON, GINO  
Address: 3101 W. MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: DPS ( ) Delete  
Name: DEL BON, ROBERTO  
Address: 3101 W. MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DCEO (X) Change ( ) Addition  
Name: DEL BON, GINO  
Address: 2 S. BISCAYNE BLVD., SUITE 3400  
City-St-Zip: MIAMI, FL 33131

Title: DPS (X) Change ( ) Addition  
Name: DEL BON, ROBERTO  
Address: 2 S. BISCAYNE BLVD., SUITE 3400  
City-St-Zip: MIAMI, FL 33131

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: GINO DEL BON

CEO

03/26/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date