

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000000451

**FILED**  
**Mar 11, 2016**  
**Secretary of State**  
**CC1606999402**

**Entity Name:** AUTOMATED PACKAGING SYSTEMS, INC.

**Current Principal Place of Business:**

10175 PHILIPP PARKWAY  
STREETSBORO, OH 44241

**Current Mailing Address:**

10175 PHILIPP PARKWAY  
STREETSBORO, OH 44241

**FEI Number:** 34-0921189

**Certificate of Status Desired:** Yes

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DRIVE  
SUITE A  
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

**Officer/Director Detail :**

Title            CEO  
Name            LERNER, BERNARD  
Address        10175 PHILIPP PARKWAY  
City-State-Zip: STREETSBORO OH 44241

Title            CFO  
Name            MANZETTI, DARYL D  
Address        10175 PHILIPP PARKWAY  
City-State-Zip: STREETSBORO OH 44241

Title            VP  
Name            LERNER, MATT  
Address        10175 PHILIPP PARKWAY  
City-State-Zip: STREETSBORO OH 44241

Title            SEC  
Name            GOESSLER, DAVID  
Address        10175 PHILIPP PARKWAY  
City-State-Zip: STREETSBORO OH 44241

Title            P  
Name            BREHM, CLIFF A  
Address        10175 PHILLIPP PKWY  
City-State-Zip: STREETSBORO OH 44241

*I hereby 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 all other like empowered.*

**SIGNATURE:** DAVID GOESSLER

**SECRETARY**

**03/11/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date