2004 UNIFORM BUSINESS REPORT (UBR) Apr 23, 2001 8:00 am Secretary of State **DOCUMENT # 398993** 1. Entity Name CORRUGATED PACKAGING, INC. 04-23-2001 90184 047 ***150.00 Principal Place of Business Mailing Address 1683 CATTLEMEN RD. 1683 CATTLEMEN RD. SARASOTA FL 34232 SARASOTA FL 34232 PUSBerr 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-1390887 Zip Country Zip Country 5.-Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SIEGEL, MARK 240 N WASHINGTON BLVD SARASOTA FL 34236 gistered office or registered agent, or both, in the State of Florida 8. The above named entity submits this statement

(See criteria on back)		Make Check Payable to Department of State			Trust Fund Contribution.	لبا Add	ed to Fees
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	TD	☐ Delete	TITLE			Change	☐ Addition
NAME	SIEGEL, RUTH LILA		NAME				
STREET ADDRESS	2228 ORIOLE DR		STREET ADDRESS		* ,		
CITY-ST-ZIP	SARASOTA FL 34239		CITY-ST-ZIP		·		
TITLE	PD	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	SIEGEL, MARK		NAME				
STREET ADDRESS	5222 LANDINGS BLVD.		STREET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34231		CITY-ST-ZiP				
TITLE	VD	. Delete	TITLE			Change	Addition
NAME ~ ~	-GREENBAUM,-ANDREA-		NAME				- '
STREET ADDRESS	38105 VIA FORTUNA		STREET ADDRESS		e t .:		
CITY-ST-ZIP	PALM SPRINGS CA 92264		CITY-ST-ZIP		<u> </u>		
TITLE	CD	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	SIEGEL, NORMAN		NAME				
STREET ADDRESS	2228 ORIOLE DR		STREET ADDRESS				1
CITY-ST-ZIP	SARASOTA FL 34239		CITY-ST-ZIP				
TITLE	SD	☐ Delete	TITLE		111 1-1-14	☐ Change	☐ Addition
NAME	COYLE, SANDRA		NAME		,		
STREET ADDRESS	1647 SHORELAND DR		STREET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34239		CITY-ST-ZIP		•		
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition
NAME			NAME				

FILE NOW!!! FEE IS \$150.00

I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

9. This corporation is eligible to satisfy its Intangible

10. Election Campaign Financing

Applied For

\$5.00 May Be

CR2E034 (10/00)

\$8.75 Additional

Fee Required

Not Applicable