
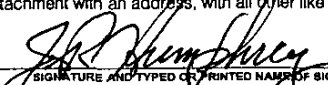


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 15, 2006 8:00 am**  
**Secretary of State**

08-15-2006 90002 006 \*\*\*150.00

<b>DOCUMENT # 487446</b> 1. Entity Name <b>INTERNATIONAL PACKAGING MACHINES, INC.</b>			
Principal Place of Business <b>3963 ENTERPRISE AVENUE NAPLES, FL 34104</b>		Mailing Address <b>3963 ENTERPRISE AVENUE NAPLES, FL 34104</b>	
2. Principal Place of Business <b>P.O. Box 8597</b> Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 8597</b> Suite, Apt. #, etc.	
City & State <b>NAPLES FL</b>		City & State <b>NAPLES FL</b>	
Zip <b>34101</b>		Country <b>USA</b>	
4. FEI Number <b>59-1659631</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>HUMPHREY, JOHN R. 3963 ENTERPRISE AVE NAPLES, FL</b>		7. Name and Address of New Registered Agent Name <b>HUMPHREY, JOHN R.</b> Street Address (P.O. Box Number is Not Acceptable) <b>3200 NORTH TAMiami TRAIL</b> <b>SUITE 300</b> City <b>NAPLES</b> <b>FL</b> Zip Code <b>34103</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>			
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE <b>S</b> NAME <b>HUMPHREY, SARAH J.</b> STREET ADDRESS <b>3963 ENTERPRISE AVE</b> CITY-ST-ZIP <b>NAPLES, FL</b>	<input type="checkbox"/> Delete	TITLE <b>P/D</b> NAME <b>3200 NORTH TAMiami TRAIL</b> STREET ADDRESS <b>NAPLES, FL 34103</b> CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>VP</b> NAME <b>LACAN, EILEEN CURRAN</b> STREET ADDRESS <b>3963 ENTERPRISE AVE.</b> CITY-ST-ZIP <b>NAPLES, FL</b>	<input checked="" type="checkbox"/> Delete	TITLE <b>P/D</b> NAME <b>3200 NORTH TAMiami TRAIL</b> STREET ADDRESS <b>NAPLES FL 34103</b> CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>P</b> NAME <b>HUMPHREY, JOHN R</b> STREET ADDRESS <b>3963 ENTERPRISE AVENUE</b> CITY-ST-ZIP <b>NAPLES, FL 34104</b>	<input type="checkbox"/> Delete	TITLE <b>P/D</b> NAME <b>3200 NORTH TAMiami TRAIL</b> STREET ADDRESS <b>NAPLES FL 34103</b> CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date <b>8/10/06</b> Daytime Phone # <b>239-777-8683</b>	

# ATTACHMENT

**INTERNATIONAL  
PACKAGING  
MACHINES, INC.**

40101545  
# 487446

P.O. Box 8597  
Naples, FL 34101-8597  
239.777.8683  
FAX 239.649-7073

August 10, 2006

Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sirs:

Enclosed is our Annual Report. I am aware that it is very late.

I have never seen the report form for this year. It may well have arrived, but we have been in a mess – is the only word that fits. We closed the manufacturing operation and moved it to Nebraska. At the same time we are setting up a separate R & D operation at a new location in Naples. In the midst of all, I spent some three plus weeks in the hospital and am still in the recovery stage.

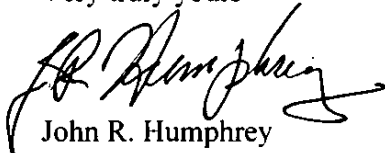
During the moves, payroll checks were lost in the mail along with many other things. (Our payroll was handled by Paychex, an outside firm). We are also missing data for filing Federal income taxes. I just have no idea where the re-up form went, maybe Nebraska, but I made a copy from your website.

The reason for this letter is to request some consideration on the late fee. I assure you we did not miss the filing date intentionally, and I think we have a long clean record on that score. We are not usually irresponsible people, but after 40 years, aren't we entitled to one mistake?

I am enclosing the usual \$150.00 fee. I await your reply and if you decide adversely, then so be it, and I will follow up immediately with the balance.

Thank you for your consideration.

Very truly yours



John R. Humphrey