## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

12201 PANGBORN AVE

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 823134

Principal Place of Business

12201 PANGBORN AVE

**ASTRO PAK CORPORATION** 

**DOWNEY CALIFORNIA 90241 DOWNEY CALIFORNIA 90241** DO NOT WRITE IN THIS SPACE US HS 3. Date Incorporated or Qualifed 07/31/1969 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 95-2578303 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired  $\Box$ Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes the current year Intangible 25 29 Personal Property Tax. Yes □No 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zio Code 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature requi reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE Change Addition 1.1 TITLE DRESSLER, DEAN R NAME 1.2 NAME 21212 HILLSDALE LANE STREET ADDRESS 1.3 STREET ADDRESS **HUNTINGTON BEACH CA** CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition TITLE 2.1 TITLE VERHEYEN JR. CARL W NAME 2.2 NAME 32592 BALERIC RD STREET ADDRESS 2.3 STREET ADDRESS MONARCH BEACH CA CITY-ST-ZIP 2.4 CITY-ST-ZIP VP or some its some ☐ DELETE Addition 31 TIRE TITLE ROLL, DARYL NAME 🔍 32 NAME 12001 SHADY ACRE STREET ADDRESS 3.3 STREET ADDRESS **GARDEN GROVE CA** CITY-ST-ZIP 3.4. CITY-ST-ZIP PD DELETE TITLE 4.1 TITLE verheyen, kenneth s 4.2 NAME NAME STREET ADDRESS 1501 GALXY 4.3 STREET ADDRESS **NEWPORT BCH CA** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 51 TILE 5 1 No. 2 1 No. 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE Change Addition TITLE. SECTION OF THE SECTIO 6.2 NAME NAME REMEMBERS OF TO TORSE CA 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

CITY-ST-ZIP

DOME DEAKINEDE SELER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(562)803-3400

**FILED** 

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90063 006 \*\*\*150.00

CR2E034 (11/98)