

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 823134**

1. Entity Name  
**ASTRO PAK CORPORATION**



Principal Place of Business  
**12201 PANGBORN AVE  
DOWNEY, CA 90241 US**

Mailing Address  
**12201 PANGBORN AVE  
DOWNEY, CA 90241 US**

**DO NOT WRITE IN THIS SPACE**



02182004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**95-2578303**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**STD  
DRESSLER, DEAN R  
21212 HILLSDALE LANE  
HUNTINGTON BEACH, CA**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**VP  
ROLL, DARYL  
12001 SHADY ACRE  
GARDEN GROVE, CA**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**PD  
VERHEYEN, KENNETH S  
1501 GALXY  
NEWPORT BCH, CA**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**VP  
SOWELL, TIMOTHY  
605 FAIRVIEW DR  
FRANKLIN, VA 23851**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

000000082174  
02/23/04-80109-023 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Dean R Dressler*  
**DEAN R DRESSLER**

**2-1804**

**(800)743-5444**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #