FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State

•	1996	4.79	tary of State CORPORATIONS		
DOCUN 1. Corporation	MENT # 8363 9	91 (3)			
	'N BEVERAGE PACKAGIN(3. INC.			
Principal Place	of Business	Mailing Address			181 1181 1181 81811 81811 81811 9 1811 91811 91811
9300 ASHTON ROAD PHILADELPHIA PA 19114-3464		9300 ASHTON ROAD			
PHINDELPH	IA TA 19114-3404	PHILADELPHIA PA 19	114-3464		
				 Date Incorporated or Qualified 05/24/1976 	3a. Date of Last Report 04/04/1995
2. Principal Pla	ace of Business	2a. Maining Address		4. FEI Number	Applied For
Suite, Apt. #	t etc	Suite, Apt. #, etc.		13-2853410	Not Applicable
22	1 0.0.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Z ip	Country	[28]	Gountry	Trust Fund Contribution	Added to Fees
24	25	[29]	30	8. This corporation has liability for Elorida Statutes 🔲 Ye	is No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent
CT CORPORATION SYSTEM					
1200 S.	PINE ISLAND ROAD		82 Street	Address (P.O. Box Number is Not Accepta	ible)
PLANTA	TION FL 33324		83		
			84 City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutr	es, the above named c	orporation submits this statement for the pic s board of directors. Thereby accept the app	uroose of changing its registered office
or registere familiar with	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authoriz tion 607,0505. Florida Statutes	ed by the corporation's	s board of directors. Thereby accept the app	pointment as registered agent. Lam
SIGNATURE _	Securities, typed coperitis index of regulation ages		du du la		
12.		VO DIRECTORS	E. Scintere t Agent signatur.		FICERS AND DIRECTORS IN 12
THLE	PC	☐ DELFTE	1 1 TITLE		Change Addition
NAME STREET ADDRESS	MCKENNA, MICHAEL J. 9300 ASHTON ROAD		1.2 NAME		;
CITY-ST-ZIF	PHILADELPHIA PA		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
TITLE	VPS	DECETE	2 1 TITLE		Change Addition
NAME	KRZYZANOWSKI, RICHARD		2.2 NAME	100	4 • <u>-</u>
STREET ADDRESS			23 STHEET ADDRESS	192 JENKINS DRIVE ENGLEWOOD CLIFFS, NJ 07632	
CITY-SI-ZIP TITLE	CINNAMINSON NJ VP	D DELETA	2 4 C/TY - ST - Z-P	ENGLEWOOD CLIFFS, NJ	
NAME	WARING, CLINTON	□ DELEIŧ	3 1 THE		Change Addition
STREET ADDRESS	9300 ASHTON RD.		3.2 NAME 3.3 STREET ADDRESS		
CITY - ST - ZIP	PHILADELPHIA PA		3 4 CITY - ST - ZIF	•	
TITLE	VPT	☐ DELEJE	4 1 TIFLE	T	Change Addition
NAME	CRAIG R. L. CALLE		4 2 NAME		
STREET ADDRESS	9300 ASHTON RD PHILADELPHIA PA		4.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE	AS	DEFELE	4.4 City - St - ZiP	 	F3.05
NAME	NARDI, MATTHEW R.	X	5 1 THEE 5 2 NAME	VD	Change 🧗 Addition
STREET ADDRESS	7 BELAIRE LN		5 3 STREET ADDRESS	RUTHERFORD, ALAN W.	
CITY-ST-ZIP	NEW HOPE PA		5.4 CHY - \$1 - ZIP	9300 ASHTON ROAD PHILADELPHIA PA 1	9136
TITLE	•	☐ D€LETE	B 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STHEET ADDRESS		
CITY - ST - ZIP			64 CITY - S1 - 712	<u> </u>	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 some legal effect as if made under oath, that I am an officer or director of the conformation or the receiver or to stee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 i changed or or an attackment will an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN NG OFFICER OR DIRECTOR

4-17-96

215-698-5340

CR2E034 (12/95)