2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004644

Entity Name: ANGELUS SANITARY CAN MACHINE COMPANY

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4900 PACIFIC BLVD. LOS ANGELES, CA 90058 **Current Mailing Address: New Mailing Address:** 4900 PACIFIC BLVD. LOS ANGELES, CA 90058 FEI Number: 95-0498670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition KOEBERLE, MAURY Name: Name: 4900 PACIFIC BLVD. Address: Address: City-St-Zip: LOS ANGELES, CA 90058 City-St-Zip: Title: Title: () Delete () Change () Addition HECK, OTTO Name: Name: 4900 PACIFIC BLVD. Address: Address: LOS ANGELES, CA 90058 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BATTAGLIA, JOSEPH P Name: Name: 4900 PACIFIC BLVD. Address: Address: City-St-Zip: LOS ANGELES, CA 90058 City-St-Zip: Title: () Delete Title: () Change () Addition FAIN, WILEY Name: Name: Address: 4900 PACIFIC BLVD. Address: City-St-Zip: LOS ANGELES, CA 90058 City-St-Zip: Title: () Delete Title: () Change () Addition HOEFER, DALE Name: Name: 4900 PACIFIC BLVD. Address: Address: LOS ANGELES, CA 90058 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition DEANE, CHARLES Name: Name: 4900 PACIFIC BLVD. Address: Address: City-St-Zip: City-St-Zip: LOS ANGELES, CA 90058

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES DEANE T 01/06/2004