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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300003718 (4)

UNI-PAK FILM SYSTEMS, INC.

FILED Jan 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 165 MINGO TRAIL 165 MINGO TRAIL LONGWOOD FL 32750 LONGWOOD FL 32750 DO NOT WHITE IN THIS SPACE 3. Date Incorporated or Qualified 08/12/1993 2. Principal Place of Business 2a. Mailing Address Applied For 26 58-1490683 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Enancing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30 29 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 Namo C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 84 City 85 Zip Code FL 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. Thereby 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 against med title if apolit able (NOTE Registered Agent signature required whee reinstating). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELFTE Change Addition 1.1.3Htf CIUBA, FRANK E NAME 1.2 NAME 313 BERWICK CT. STREET ADDRESS 1.3 STREET ADDRESS HEATHROW FL CITY-ST-ZIP 14 CHY - ST - 7P Change DELETE Addition TITLE 2 1 1IILE HUCKABY, JAMES W NAME 2.2 NAME 2758 BROOKCLIFF LANDING STREET ADDRESS 2.3 STREET ADDRESS MARIETTA GA 30062 CITY-ST-ZIP 2 4 CHY+SL ZIP DELETE Change Addition TITLE 3.1 THUE NAME 3.2 NAMI STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Addition TITLE 5.11000 NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-7/P Addition ... DELFTE Change TITLE 617011 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 triat the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outli, that I am an officer or director of the corporation or the receiver or trusted 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.