SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** F95000004235 (6)

ULTRA FLEX PACKAGING CORP.

Principal Place of Business 975 ESSEX ST.

Mailing Address

975 ESSEX ST.

## FILED Jul 16 1998 8:00am Secretary of State



**BROOKLYN NY 11208 BROOKLYN NY 11208** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/31/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 11-2327083 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Country Zip Country Zip 8. This corporation owes or has paid the current year Intengible ¥ Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 83 84 City Zip Code

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 required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PDC 1.1 TITLE TITLE DELETE Change Addition BLATT, ELI SMITH, ROBERT NAME 1.2 NAME 975 ESSEX ST. 975 ESSEX ST. STREET ADDRESS 1.3 STREET ADDRESS **BROOKLYN NY 11208** BROOKLYN NY 11208 CITY-ST-ZIP 14 CITY-ST-ZIP VTDC 2.1 TITLE Change X Addition TITLE DELETE SALERNO, ALFRED SALERNO, EUGENE 2.2 NAME NAME 975 ESSEX ST. 975 ESSEX ST. STREET ADDRESS 2.3 STREET ADDRESS BROOKLYN NY 11208 BROOKLYN NY 11208 CITY-ST-ZIF 2.4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE \_\_ Change Addition ADDISON, TODD NAME 3.2 NAME 975 ESSEX ST. 3.3 STREET ADDRESS STREET ADDRESS **BROOKLYN NY 11208** 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 4.1 TITLE Change DELETE Addition FOX, ROBERTA 4.2 NAME NAME 975 ESSEX ST. 4.3 STREET ADDRESS STREET ADDRESS **BROOKLYN NY 11208** 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE TITLE DELETE Change \_\_\_ Addition 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 trufflee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (5/98)