

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F98000003993

**FILED**  
**May 30, 2008**  
**Secretary of State****Entity Name:** ANDLER PACKAGING CORPORATION**Current Principal Place of Business:**376 THIRD STREET  
EVERETT, MA 021490002**New Principal Place of Business:****Current Mailing Address:**PO BOX 499125  
EVERETT, MA 021490002**New Mailing Address:****FEI Number:** 04-3293557**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BRODY, EDWARD  
6010 FALLS CIRCLE DRIVE SOUTH  
BLDG 100 APT 424  
LAUDERHILL, FL 33319 US**Name and Address of New Registered Agent:**ANDLER, GURNIECE  
5823 A BROOK BOUND LANE  
APT 52  
BOYNTON BEACH, FL 33437 US

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: GURNIECE ANDLER

05/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: ANDLER, MARC  
Address: 21 NORTH STONE  
City-St-Zip: SWAMPSCOTT, MA 01907

Title: VCVS ( ) Delete  
Name: ANDLER, ARNOLD  
Address: 32 HAWTHORNE LANE  
City-St-Zip: WESTON, MA 02193

Title: T ( ) Delete  
Name: ANDLER, ARNOLD  
Address: 32 HAWTHORNE LANE  
City-St-Zip: WESTON, MA 02193

Title: D ( ) Delete  
Name: MURPHY, RITA  
Address: 7 HELLEN ROAD  
City-St-Zip: BRAINTREE, MA 02184

Title: D ( ) Delete  
Name: MCLAUGHLIN, RICHARD  
Address: 7500 VENTNOR AVE  
City-St-Zip: MARGATE CITY, NJ 08402

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RITA MURPHY

SEC

05/30/2008

Electronic Signature of Signing Officer or Director

Date