## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 28, 2005 8:00 am Secretary of State DOCUMENT # F99000001734 04-28-2005 90171 021 \*\*\*150 00 INTEGRATED BAGGING SYSTEMS CORPORATION Principal Place of Business Mailing Address 9 PEACH TREE HILL ROAD 9 PEACH TREE HILL ROAD LIVINGSTON, NJ 07039 LIVINGSTON, NJ 07039 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 22-3103896 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Addition Delete TITLE CHEN, JOE NAME NAME STREET ADDRESS 9 PEACH TREE HILL ROAD STREET ADDRESS LIVINGSTON, NJ 07039 CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME CHANG, Y L NAME STREET ADDRESS 9 PEACH TREE HILL ROAD STREET ADDRESS CITY-ST-ZIP LIVINGSTON, NJ 07039 CITY-ST-ZIP TITLE CD ☐ Change Addition ☐ Delete TITLE NAME WANG, Y C NAME 9 PEACH TREE HILL ROAD STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-7IP LIVINGSTON, NJ 07039 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NIGHTINGALE, ALICE NAME NAME 9 PEACH TREE HILL ROAD STREET ADDRESS STREET ADDRESS CITY-ST-71P LIVINGSTON, NJ 07039 CITY-ST-ZIP TITLE Delete X Change ☐ Addition TITLE LIAO TY NAME NAME WANG, JOSEPH STREET ADDRESS 9 PEACH TREE HILL ROAD STREET ADDRESS 9 PEACH TREE HILLRROAD CITY-ST-ZIP LIVINGSTON, NJ 07039 CITY-ST-ZIP LIVINGSTON, NJ-07039 TITLE ☐ Delete TITLE ☐ Change ☐ Addition YOUNG, JOHN D NAME NAME 9 PEACH TREE HILL RD STREET ADDRESS STREET ADDRESS LIVINGSTON, NJ 07039 CITY-ST-ZIP 12. 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

JOE CHENTPRES.

TED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OF FA

**FILED** 

973-992-8000

Daytime Phone #