

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L45023

1. Entity Name
PACK IT IN, INC.

Principal Place of Business Mailing Address
505 BEACHLAND BLVD. } 5940
SUITE 1
VERO BEACH, FL 32963
U.S.

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country

4. FEI Number 59-2993677 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELANGE, PHILLIP R
5500 BENT PINE DRIVE
VERO BEACH, FL 32967

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME DELANGE, PHILLIP
STREET ADDRESS 5500 BENT PINE DRIVE
CITY-ST-ZIP VERO BEACH, FL 32967 ☐ Delete

TITLE VP
NAME DELANGE, DEBBIE
STREET ADDRESS 5500 BENT PINE DRIVE
CITY-ST-ZIP VERO BEACH, FL 32967 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
700004677337--3
-11/13/01--01091--018
****150.00 ****150.00
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 10/24/01 561-231-0021

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 26 AM 11:33

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)

Pack It In, Inc
dba Pak Mail

505 Beachland Blvd., Suite #1
Vero Beach, FL 32966
Phone: (561) 231-0021
Fax: (561) 231-0016

October 24, 2001

Department of State
Division of Corporations
Annual Report/reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Dear Sir or Madam:

I have just received the Notice of Administrative Dissolution. This surprised us as we have not received any prior notice of the usual 2001 Uniform business report. I called the phone number and was informed to download a 2001 Uniform Business Report, fill it out, submit a check for \$150.00 with a letter that explains we had not received prior notification this year. Well, here it is. I have also included a copy of my 2000 Uniform Business Report (nothing has changed). Thank you for your attention in this manner.

Sincerely,


Phil DeLange
President