

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90098 013 ***150.00

DOCUMENT # P 00000097588 ✓

1. Entity Name

CITY PACKING, CORP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7431-34 W. ATLANTIC AVE

3. Mailing Address

Suite, Apt. #, etc.

149

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

DELRAY BEACH, FL

City & State

4. FEI Number

65-1048051

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

WALTER E. HOGAN CAMP

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

9640 NW 7th Circle - # 2018

City

PLANTATION

FL

Zip Code
33324

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P-D
HARVEY TICHAUER
7431-34 W. ATLANTIC AVE
DELRAY BEACH, FL 33446

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

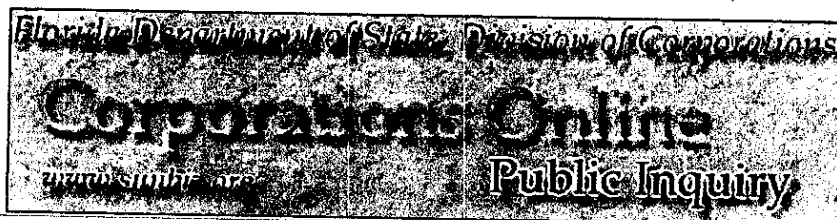
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034B (12/01)

ATTACH # P00000097588/655988



Florida Profit

CITY PACKING, CORP.

PRINCIPAL ADDRESS

3698 1/2-G NW 16TH ST
BAY-6
LAUDERHILL FL 33311
Changed 03/09/2001

MAILING ADDRESS

3698 1/2-G NW 16TH ST
BAY-6
LAUDERHILL FL 33311
Changed 03/09/2001

Document Number
P00000097588

FEI Number
651048051

Date Filed
10/17/2000

State
FL

Status
ACTIVE

Effective Date
NONE

Registered Agent

Name & Address
CINNANIE, DENNIS 3698 1/2 N.W. 16TH ST LAUDERHILL FL 33311
Name Changed: 03/09/2001

Officer/Director Detail

Name & Address	Title
CINNANIE, DENNIS 3698 1/2 BAY 6 NW 16TH ST LAUDERDALE FL 33311	PD