2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107614

Entity Name: PRIME PACKAGING, INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9165 NW 101ST STREET MEDLEY, FL 33178

Current Mailing Address: New Mailing Address:

16363 NW 49TH AVENUE 16363 NW 49TH AVENUE MIAMI LAKES, FL 33014 MIAMI, FL 33014

FEI Number: 65-1071466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARAKAT, MOHAMAD

16363 NW 49TH AVENUE
MIAMI LAKES, FL 33014 US

BARAKAT, MOHAMAD

16363 NW 49TH AVENUE

MIAMI, FL 33014 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: 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BARAKAT, MOHAMAD
 Name:
 BARAKAT, MOHAMAD

 Address:
 16363 NW 49TH AVENUE
 Address:
 16363 NW 49TH AVENUE

Address: 16363 NW 49TH AVENUE Address: 16363 NW 49TH AVENUI

City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip: MIAMI, FL 33014

Title: DVT () Delete Title: DVT (X) Change () Addition

 Name:
 BARAKAT, MAGED
 Name:
 BARAKAT, MAGED

 Address:
 16363 NW 49TH AVENUE
 Address:
 16363 NW 49TH AVENUE

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:
 MIAMI, FL 33014

Title: DVS () Delete Title: DVS (X) Change () Addition

 Name:
 LINARES, FRANCISCO
 Name:
 LINARES, FRANCISCO

 Address:
 16363 NW 49TH AVE.
 Address:
 16363 NW 49TH AVENUE

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:
 MIAMI, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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: MOHAMED BARAKAT PD 04/26/2006