2004 FOR PROFIT CORPORATION

Secretary of State ANNUAL REPORT 05-13-2004 90008 038 ***150.00 **DOCUMENT # P01000116324** 1. Entity Name PACCO SERVICES, INC. 24075255 Principal Place of Business Mailing Address 8967 YARMOUTH ROAD 8967 YARMOUTH ROAD JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04262004 CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 59-3760338 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PACKHAM, HERBERT W JR. Street Address (P.O. Box Number is Not Acceptable) 8967 YARMOUTH ROAD JACKSONVILLE, FL 32257 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. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE Delete TITLE PACKHAM, HERBERT JR NAME NAME 8467 YARMOUT RD. STREET ADDRESS STREET ADDRESS JACKSONVILLE, FL 32257 CITY-ST-7IP CHY-ST-ZIP Detete Change Addition 1ITLE TITLE NAME PACKHAM, ANNE NAME STREET ADDRESS 8967 YARMOUTH RD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JACKSONVILLE, FL 32257 . Delete TITLE. TITLE. Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZiP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Delete

GITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

FILED May 13, 2004 8:00 am

Change

☐ Addition

DEPARTMENT OF STATE

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 26, 2004

PACCO SERVICES,INC. 8967 YARMOUTH ROAD JACKSONVILLE, FL 32257

SUBJECT: PACCO SERVICES INC. Ref. Number: P01000116324

Upon receipt of your letter and/or check(s) totaling \$150.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited. Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 304A00027493