

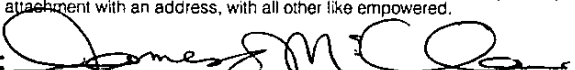


FILED
Apr 11, 2005 8:00 am
Secretary of State

50035699

DOCUMENT # P01026 1. Entity Name TETRA PAK INC.				04-11-2005 90174 002 ***150.00	
Principal Place of Business 101 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061		Mailing Address 101 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061		50035699	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03292005 Chg-P CR2E034 (10/03)	
City & State		City & State		4. FEI Number 75-1537534	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MURRAY, ALAN 101 CORPORATE WOODS PKWY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD James E. McClain 101 Corporate Woods Pkwy Vernon Hills IL 60061	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD KENNELL, BRIAN 101 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS Ray Collins 3300 Airport Rd. Denton, TX 76207	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS PACYNA, LEO 101 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT Pacyna, Leo	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT ZUERCHER, BRENT 101 CORPORATE WOODS PKWY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS KELLY, MARY ELLEN 101 CORPORATE WOODS PKWY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BAKER, ROBERT L. 101 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.					
SIGNATURE: 		3/30/05		847-955-6500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	