2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Jul 25, 2005 8:00 am DOCUMENT # P02000093913 **Secretary of State** 1. Entity Name 07-25-2005 90095 034 ***150.00 PACKAGING CONCEPT CONSULTING, INC. Principal Place of Business Mailing Address 2895 164TH AVENUE N. CLEARWATER FL 33760 2895 164TH AVENUE N. CLEARWATER FL 33760 2. Principal Place of Business 3. Mailing Address 2895 IGHTH AVE. NORTH 2895 AVE. Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 58-2387413 CLEAR WATER CLEARWATER Not Applicable Zip33760 Zip 33760 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DORIEKA, JOHN PETER Street Address (P.O. Box Number is Not Acceptable) 2895 164TH AVENUE N. **CLEARWATER FL 33760** Zip Code FL 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 Signature, typed or printed name or registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE D Delete TITLE Change DOREIKA, JOHN PETER NAME NAME 2895 164TH AVENUE N. STREET ADDRESS STREET ADDRESS CITY ST-ZIP CLEARWATER FL 33760 CITY-ST-ZIP D ☐ Delete THLE ☐ Change Addition TITLE DOREIKA, CYNTHIA E NAME NAME STREET ADDRESS 2895 164TH AVENUE N. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33760 CITY-ST-ZIP HILE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P Addition Delete ☐ Change THEF TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7P ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-7/P CITY-ST-ZIP 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

JOHN P. DOREINA PRESIDENT 7/19/05

SCINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

ATTACHMENT

PACKAGING CONCEPT CONSULTING, INC.

50.057194

July 19, 2005
Florida Department of State
Glenda E. Hood
Tallahassee, FL 32314
R/E P02000093913

Dear Ms Hood,

This note is an explanation of the late filling of the enclosed papers. We never received any Annual Report in the mail and the first indication of a problem was when we received a postcard indicating a notice to dissolve the company.

We immediately called for an explanation and were informed that we had not filled this report. At that time we went on line at www.sunbiz.org and were unable to access the forms needed for this filling. The response was consistently "cannot access this page". We also sent the postcard requesting another form, which we have now delivered.

We apologize for the delay but feel we are not responsible for a late filling fee since we did not receive the forms within the original signing period. We are a two man operation and both of us are aware of any mail received.

Thank you for any considerations,

Dragidant

2985 164th Avenue North Clearwater, FL 33760-1947 Phone: (727) 507-3565 Fax: (727) 536-5819