2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2005 08:00 Secretary of Stat

| DOCUMENT # P03000014861 1. Entity Name OUT THE CORP. | | | | - - - | Secretary |
|---|--|--|---|--|--|
| GLOBAL | PACKAGING SYSTEM CO | RP. | | | |
| 701 RENNE | ce of Business R RD N, DE 19810 | Mailing Address 701 RENNER RD WILMINGTON, DE 19810 | .) | | |
| E | OO NOT WRITE | was a superior of the superior | CE | 01202005 No Chg 4. FEI Number 76-0725395 5. Certificate of Status De | Applied For Not Applicable |
| | 5. Name and Address of Current | Registered Agent | - | | |
| CORPORATE ACCESS, INC. 236 E, 6TH AVE. TALLAHASSEE, FL 32303 | | | 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when revisiting) DATE | | | | | |
| FIL After M | E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0 | 9. Election Campaign Fina Trust Fund Contribution | | .00 May Be ed to Fees | |
| TITLE | OFFICERS AND | DIRECTORS | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | SERGE, M BRICOUT 34 AVE DES CHAMPS ELYSEES PARIS, FRANCE, 75008 | . | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | 04/15/ | 0000307979 05-80076-014 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO NOT | WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZPP | | | 97 J102 T1 | IN THIS | SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby of indicated of the corchanged, | certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo , or on an attachment with an address, v | this filing does not qualify for the ex- true and accurate and that my signal wered to execute this report as requ- vith all other like empoweres. | emption stated in Set ature shall have the s tired by Chapter 607 | ction 119.07(3)(i), Florida Ste same legal effect as if made , Florida Statutes; and that rr | alutes. I further certify that the Information under oath; that I am an officer or director by name appears in Block 10 or Block 11 if |
| SIGNATURE: Signature And Typed on Printed NAME OF SIGNING OFFICEROR QUARTED A Date Dayting Phone # | | | | | |