## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000141761

Entity Name: PACK N' PLUS INC.

**FILED** Mar 31, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2755 S. RIDGEWOOD AVE SOUTH DAYTONA, FL 32119 **Current Mailing Address: New Mailing Address:** 2755 S. RIDGEWOOD AVE SOUTH DAYTONA, FL 32119 FEI Number: 11-3729098 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: SILVESTRI, GINA 2755 S. RIDGEWOOD AVE SOUTH DAYTONA, FL 32119 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** 

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SILVESTRI, ROBERT SILVESTRI, BIANCA Name: Name: 2755 S. RIDGEWOOD AVE 2755 S. RIDGEWOOD AVE Address: Address: City-St-Zip: SOUTH DAYTONA, FL 32119 City-St-Zip: SOUTH DAYTONA, FL 32119

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

Name: SILVESTRI, BIANCA Name: SILVESTRI, ROBERT 2755 S. RIDGEWOOD AVE 2755 S. RIDGEWOOD AVE Address: Address: SOUTH DAYTONA, FL 32119 SOUTH DAYTONA, FL 32119 City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title: S/T

SILVESTRI, GINA SILVESTRI, GINA Name: Name: 2755 S. RIDGEWOOD AVE 2755 S. RIDGEWOOD AVE Address: Address: City-St-Zip: SOUTH DAYTONA, FL 32119 City-St-Zip: SOUTH DAYTONA, FL 32119

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GINA SILVESTRI S/T 03/31/2005