

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morrison
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 27 AM 10:58

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P14376 (8)

1. Corporation Name

WINPAK, INC.

Principal Place of Business

**100 SAULTEAUX CRES.
WINNIPEG, CANADA R3J 3T3**

Mailing Address

**100 SAULTEAUX CRES.
WINNIPEG, CANADA R3J 3T3**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/08/1987

3a. Date of Last Report

04/18/1994

4. FEI Number

98-0078600

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **LAVERY, J.R.**
STREET ADDRESS **35 DUMBARTON BLVD.**
CITY - ST - ZIP **WINNIPEG, CANADA R3P 2C7**

TITLE **AS**
NAME **SHARP, J.C.**
STREET ADDRESS **130 BRENTFORD RD.**
CITY - ST - ZIP **WINNIPEG CANADA R2M 5B9**

TITLE **CD**
NAME **AARNIO-WIHURI, A.**
STREET ADDRESS **KAVALLINTIE 39-41B**
CITY - ST - ZIP **KAUNIANEN, FINLAND**

TITLE **CD**
NAME **YARNELL, E. R.**
STREET ADDRESS **135 ASH STREET**
CITY - ST - ZIP **WINNIPEG, CANADA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Director

J. Leppanen

Wihuri Oy Head Office

P.O Box 29 SF-00571, Helsinki, Finland

Director

Lawrence O. Pollard

1499 Buffalo Place

Winnipeg, Manitoba, Canada R3T 1L7

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

C. Sharp Assistant-Secretary 13 April 1995 (204)889-1015

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

System Issues #