

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90158 044 ***150.00

DOCUMENT # P15432



1. Entity Name
VITRO PACKAGING, INC.

Principal Place of Business
**5200 TENNYSON PARKWAY
SUITE 100
PLANO TX 75024**

Mailing Address
**5200 TENNYSON PARKWAY
SUITE 100
PLANO TX 75024**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

22-2258737

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MOSSBURG, MICHAEL	
STREET ADDRESS	16051 ADDISON ROAD #300	
CITY-ST-ZIP	ADDISON TX 75001	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GUTIERREZ, RAUL	
STREET ADDRESS	16051 ADDISON ROAD #300	
CITY-ST-ZIP	ADDISON TX 75001	
TITLE	S	<input type="checkbox"/> Delete
NAME	ROMERO, FRANCISCO	
STREET ADDRESS	16051 ADDISON RD., #300	
CITY-ST-ZIP	ADDISON TX 75001	
TITLE	VP	<input type="checkbox"/> Delete
NAME	RICH, STEVE	
STREET ADDRESS	16051 ADDISON RD., #300	
CITY-ST-ZIP	ADDISON TX 75001	
TITLE	V	<input type="checkbox"/> Delete
NAME	ULLOM, WILLIAM R.	
STREET ADDRESS	16051 ADDISON RD. #300	
CITY-ST-ZIP	ADDISON TX 75001	
TITLE	VPM	<input type="checkbox"/> Delete
NAME	FARLANDER, LEE	
STREET ADDRESS	16051 ADDISON ROAD #300	
CITY-ST-ZIP	ADDISON TX 75001	

TITLE	Controller	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kevin B. Jackson	
STREET ADDRESS	5200 Tennyson Pkwy, Ste 100	
CITY-ST-ZIP	Plano, TX 75024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	5200 Tennyson Pkwy, Ste 100	
CITY-ST-ZIP	Plano, TX 75024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP	Plano, TX 75024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	5200 Tennyson Pkwy, Ste 100	
CITY-ST-ZIP	Plano, TX 75024	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	5200 Tennyson Pkwy, Ste 100	
CITY-ST-ZIP	Plano, TX 75024	

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:

Stephen R. Couch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/2003

Date

469-443-1190

Daytime Phone #

CR2034 (10/02)