2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000018051

Entity Name: C.J.T. PACKAGING, INC.

110 CAMPION DRIVE

WAVELAND, MS 39576 US

Address: City-St-Zip: FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1700 N.W. 22 COURT UNIT 9 POMPANO BEACH, FL 33069				1631 SOUTH DIXIE H SUITE F2 POMPANO BEACH, F		US
Current Mailing Address:				New Mailing Address:		
1700 N.W. 22 COURT UNIT 9 POMPANO BEACH, FL 33069				1631 SOUTH DIXIE HIGHWAY SUITE F2 POMPANO BEACH, FL 33060 US		
FEI Number:	65-0474378	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certifica	te of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
	SKI, JEFFREY EAN BLVD					
FORT LAL	JDERDALE, FI	_ 33306 US				
	named entity see of Florida.	submits this statement for the p	urpose o	of changing its registere	d office or r	egistered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D (X TYLA, CHARLE 1621 SW 5TH A POMPANO BEA	AVE.		Title: Name: Address: City-St-Zip:	() Change(() Addition
Title: Name: Address: City-St-Zip:	MAJKOWSKI, J 2919 N OCEAN			Title: Name: Address: City-St-Zip:	() Change (() Addition
Title: Name:	D,VP () MILLER, LISA	Delete		Title: Name:	() Change (() Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: JEFFREY MAJKOWSKI PRES 04/27/2009