## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000031896 (1)

**AUTOPAK INTERNATIONAL CORPORATION** 

Principal Place of Business Mailing Address

**FILED** May 18 1998 8:00am Secretary of State



P.O. BOX 562001 MIAMI FL 33256-2001 US		P.O. BOX 562001 MIAMI FL 33256-2001 US				DO NOT WRITE IN THIS SPACE			
						<ol> <li>Date Incorporated or Qualified</li> <li>04/27/1994</li> </ol>			
2. Principal Place of Business 2a. Mailing Address			dress			4, FEI Number	<del></del>	Applied For	
21		<u>⊢</u> 1	26			65-0489385	Not Applicable		
Suite, Apt.	#. etc.		Suite, Apt. #, etc.			00 0403000	_ ¢o :	75 Additional	
22		27	27			5. Certificate of Status Desired Fee Required			
City & State	Đ	City & State	├ <del>-</del> ¬ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Country		8. This corporation owes or has paid the current year Intangible			
24	25	29	30	Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
AR	THUR, ROBERT A			81	Name				
9061 SW 156 ST APT. A115				-	Chart	dean (D.O. Down Number 1: Alex Sec.			
MAMI FL 33157				82	Street Add	dress (P.O. Box Number is Not Acceptable	e)		
*1707	wii: , <b>5</b> 44 (4)			83					
				84	City		<b>65</b>	Zıp Code	
44.0		0500 1007 :					PL		
office or re	egistered agent, or both, in the S	tate of Florida Such cha	inge was author	orized by	the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept			
•	m familiar with, and accept the ol	bligations of, Section 60	7.U5U5, Florida	statutes	š.				
SIGNATURE	Signature typed or enoted page of the same	d worst and title if applicable	NOTE P	nisternal Acr	Ot properties	ured when reinstating)	DATE		
12.				13.	in algusture requ	ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
TITLE	PM		DELETE	1 1 TIFLE		7.557770747777777777	Char		
NAME	ARTHUR, ROBERT A	<u> </u>		1.2 NAME					
STREET ADDRESS	9041 SW 156TH ST., APT	R221	ŀ	1.3 STREET	VDUDESC				
CITY-ST-ZIP	MIAMI FL	OLL I	ŀ	1.4 CITY-S					
TITLE	C		DELETE	2.1 TIFLE	1-20		Char	nge Addition	
NAME	LATCHMANNA, RAJOO	<u> </u>		2.1 NVME					
STREET ADORESS	236 SYDNEY RD.			2.3 STREET	ADDRESS			ľ	
CITY-ST-ZIP	DURAN NATAL SOUTH A	FRICA NA		2.4 CITY-9				ļ	
TITLE				3.1 TIFLE	0 - 40		Char	nge Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	Anneess				
CITY-ST-ZIP				3.5 5 HEET				ĺ	
TITLE		—————		4.1 TITLE	11 - 14F		Char	nge Addition	
NAME		<u>,</u>		4. 2 NAME	Ì				
STREET ADDRESS				4.3 STREET	YUUDEGG			1	
CITY-ST-ZIP			ļ	4.3 S REET				ļ	
TITLE			DELETE	51 THLE	1 - ZIP		Char	nge Addition	
NAME		L! '		52 NAME				Ac T Logicon	
			b		Anonena				
STREET ADDRESS				5.3 S REET	<b>!</b>				
CITY-ST-ZIP		·		5.4 C TV - S	I-ZIP	· <del></del>	Char	nae Addition	
TITLE				6.1 TITLE	-		i Cliar	rge [_] Addition	
NAME				6.2 NAME					
STREET ADDRESS				6 3 STREET	ADORESS			ļ	
OUTLY OF THE				C . C TH C	T 7400				

14. 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 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 13 if changed 6] on an attachment with an address