

**FILED**  
**Jul 19, 2004 8:00 am**  
**Secretary of State**

04-09-2004 90024 031 \*\*\*150.00

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P94000082273**

1. Entity Name  
**SOLAR PACKAGING CORP.**



Principal Place of Business

**4950 N. W. 165 ST.  
MIAMI, FL 33014 US**

Mailing Address

**4950 N.W. 165 ST.  
MIAMI, FL 33014 US**

**66430142**



04012004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0558228**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75-Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**DORNBUSCH, JAIME  
4920 N.W. 165TH STREET  
MIAMI LAKES, FL 33014**

**DO NOT WRITE  
IN THIS SPACE**

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 *Jaime Lopez*  
Signature, type or print name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/1/04  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HANKS, ROBERT  
ONE BOSTON PALCE, SUITE 2100  
BOSTON, MA 02108**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
DORNBUSCH, JAIME  
4920 N.W. 165TH STREET  
MIAMI LAKES, FL 33104**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
GARAZI, EDWARD  
4920 N.W. 165TH STREET  
MIAMI LAKES, FL 33104**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
PAPPAS, MICHAEL  
1900 SOUTH BLVD  
CHARLOTTE, NC 28203**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
LETZELTER, JOSEPH O  
327 PALM BLVD  
TAMPA, FL 33626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GRAY, STEVEN  
270 CONGRESS STREET  
BOSTON, MA 02210**

**DO NOT WRITE  
IN THIS SPACE**

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: *Jaime Lopez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/04  
Date

Daytime Phone #

Attachment

66430142

April 13, 2004

SOLAR PACKAGING CORP.  
4950 N.W. 165 ST.  
MIAMI, FL 33014 US

SUBJECT: SOLAR PACKAGING CORP.  
Ref. Number: P94000082273

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6056 and press 4. Your call will be answered in the order it is received.

ANNUAL REPORTS SECTION

Letter number: 404A00024421

/vrh  
Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida  
32314