

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000082273

FILED  
Feb 02, 2006  
Secretary of State

Entity Name: SOLAR PACKAGING CORP.

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 65-0558228

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HANKS, ROBERT  
Address: ONE BOSTON PALCE, SUITE 2100  
City-St-Zip: BOSTON, MA 02108

Title: PD ( ) Delete  
Name: DORNBUSCH, JAIME  
Address: 4920 N.W. 165TH STREET  
City-St-Zip: MIAMI LAKES, FL 33104

Title: SD ( ) Delete  
Name: GARAZI, EDWARD  
Address: 4920 N.W. 165TH STREET  
City-St-Zip: MIAMI LAKES, FL 33104

Title: D ( ) Delete  
Name: PAPPAS, MICHAEL  
Address: 1900 SOUTH BLVD  
City-St-Zip: CHARLOTTE, NC 28203

Title: VP (X) Delete  
Name: LETZELTER, JOSEPH O  
Address: 327 PALM BLVD  
City-St-Zip: TAMPA, FL 33626

Title: D ( ) Delete  
Name: GRAY, STEVEN  
Address: 270 CONGRESS STREET  
City-St-Zip: BOSTON, MA 02210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JAIME DORNBUSCH

PD

02/02/2006

Electronic Signature of Signing Officer or Director

Date