

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000035697 (8)

1. Corporation Name
WEI-PAK INC.



Principal Place of Business
647 SNUG HARBOR DR.
BOYNTON BEACH FL 33435

Mailing Address
647 SNUG HARBOR DR.
BOYNTON BEACH FL 33435

3. Date Incorporated or Qualified 05/02/1995
3a. Date of Last Report

2. Principal Place of Business
21 6987 LAKE ISLAND DR.
Suite, Apt. #, etc.

2a. Mailing Address
26 6987 LAKE ISLAND DR.
Suite, Apt. #, etc.

4. FEI Number 65-0580971
Applied For
Not Applicable

22 City & State
23 LAKE WORTH, FL

27 City & State
28 LAKE WORTH, FL

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

24 33467 25 Palm Beach 29 33467 30 Palm Beach

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARR, WAYNE R
647 SNUG HARBOR DR.
BOYNTON BEACH FL 33435

81 Name WAYNE R BARR
82 Street Address (P.O. Box Number is Not Acceptable)
6987 LAKE ISLAND DRIVE
83
84 City LAKE WORTH FL 85 Zip Code 33467

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

WAYNE R. BARR

(NOTE: Registered Agent signature required when reinstating)

DATE

APRIL 25, 1996

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
PRESIDENT AND TREASURER	WAYNE R. BARR	6987 LAKE ISLAND DRIVE	LAKE WORTH, FL 33467	
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
SECRETARY	PATRICIA B. BARR	6987 LAKE ISLAND DRIVE	LAKE WORTH, FL 33467	
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wayne R. Barr

Date

April 25, 1996 407-963-9900

Daytime Phone #

CR2E034 (12/95)