## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 09, 2005 08:00 AM Secretary of State

DOCUMENT # P95000055902  1. Entity Name PAK UNLIMITED, INC.			Secretary of State	
	e of Business SHIER BLVD. FL 34420	Mailing Address 5068 SE ABSHIER BLVD, BELLEVIEW, FL 34420	· · · · ·	
DO NOT WRITE IN THIS SPAC				01272005 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For 59-1628566 Not Applicable  5. Certilicate of Status Desired □ \$8.75 Additional Fee Required
PERICO, JOSEPH 5068 SE ABSHIER BLVD. BELLEVIEW, FL 34420				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  Signature, typed or orinted name of registered agent and bits if applicable.  (NOTE: Registered Agent signature required when reinstaing)  DATE  1. **Comparison**  Page 1. **Comparison**  Storic May 1. **Comparison**  Page 2. **Comparison**  Page 3. **Comparison**  Page 4. **				
Altor May 1, 2000 1 66 Will be \$550.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST PERICO, JOSEPH 5068 SE ABSHIER BLVD. BELLEVIEW, FL 34420	RECTORS		U00000257293
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERICO, JOSEPH 5068 SE ABSHIER BLVD. BELLEVIEW, FL 34420	· -	· - <u></u>	03/03/05-80048-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	<u>.</u>	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 entrustee 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 withy an address, with all other like empowered.				