Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90064 042 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000072489

1. Corporation Name

SWEETY PACKAGING, CO										
					1	1 10011001 110 1010	1 <b>3</b> 1111 <b>31</b> 111 <b>31</b> 111 <b>3</b>	<b>19</b> 112 <b>131</b> 131 1 <b>31</b>	1 <b>2</b> 11 <b>3</b> 11 <b>1113</b>	198118 (8) 1881
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MELBOURNE FL 32935 MELBOURNE FL 32935 US US				-	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
1						09/18/1995	, danien			
2. Principal Place of Business 2a. Mailing Address		<del></del>			4. FEI Number		<del></del>	I A	oplied For	
21		6				59-3336842	_		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status	Desired [		•	Additional
22 27						J. Certificate of Otolog			Fee R	equired
City & State City & State		¬ '				6. Election Campaign	7 1		-	May Be
23     28		2ip	Country			Trust Fund Contribu				to Fees
24 2	—, ·		30		1	<ol> <li>This corporation ow Personal Property</li> </ol>		-	giole ∃Yes	□No
<del></del>	ind Address of Current Re		J			0. Name and Addres				
			81	Name						-
PALACIOS, FERNANDO M ESQ. 525 EAST STRAWBRIDGE AVENUE			82	Street A	Address	(P.O. Box Number is I	Vot Accentable		-	<del></del>
MELBOURNE FL								<u></u>		
MELDOGINALI	02301	•	83							
			84	City		·		FL	85 Zip	Code
11 Pursuant to the provision	ns of Sections 607,0502 and	d 607.1508. Florida Statute	es, the above	e-named o	corporat	tion submits this statem	ent for the pur	pose of ch	anging its	registered
11. Pursuant to the provision office or registered age	ons of Sections 607.0502 and nt, or both, in the State of Fig.	d 607.1508, Florida Statute orida. Such change was au of Section 607.0505, Flor	es, the above uthorized by ida Statutes	e-named of the corpo	corporat oration's	ion submits this statem board of directors. I he	ent for the pur ereby accept th	pose of ch e appointr	anging its nent as re	registered gistered
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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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

STREET ADDRESS

CITY-ST-ZIP

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WIRE REQUIRED READ THE OF SIGNING OFFICER OR DIRECTOR

DELETE

407-259-5316

[ ] Change

Addition