2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90638 049 ***150.00

DOCUMENT # P96000040762

1. Entity Name
F-PACK INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
515 MADISON AVE 21ST FLOOR NEW YORK NY 10022 US	515 MADISON AVE 21ST FLOOR NEW YORK NY 10022 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0664954

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WORLD WIDE CORPORATE SERVICES INC. 1 FINANCIAL PLAZA #2626 FT. LAUDERDALE FL 33394	Name Street Address (P.O. Box Number Not Acceptable) City FL Zip Code

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.

SIGNATURE _____ DATE
Signature of Director or Officer (Required) Print Name and Title if applicable (NOTE: Registered Agent signature required on this statement)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 Per Each Applicable Person

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D ☐ Delete	TITLE	☐
NAME	POLLAND, MILTON	NAME	
STREET ADDRESS	230 PARK AVE.	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10169	CITY-ST-ZIP	
TITLE	PD ☐ Delete	TITLE	☐
NAME	RAMETRA, SURINDER	NAME	
STREET ADDRESS	230 PARK AVE.	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10169	CITY-ST-ZIP	
TITLE	P ☐ Delete	TITLE	☐
NAME	POPE, DOMINICK	NAME	
STREET ADDRESS	195 10TH AVE	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 1011	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐
NAME	SNUPPES, MICHELLE P	NAME	
STREET ADDRESS	195 10TH AVE	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 1011	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 a director or officer 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 Dominick Pope DOMINICK POPE 4/24/01 941-392-6975
SIGNATURE AND TITLE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR