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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000085308 (0)**1. Corporation Name

ALL PACKAGING SUPPLIES, INC.

Principal Prace of Business Mailing Address 127 SE 1ST AVE. STE 109 127 SE 1ST AVE. STE 109 HALLANDALE FL 33009-5551 HALLANDALE FL 33009 3. Date Incorporated or Qualified 3a. Date of Last Report 10/16/1996 2. Principal Place of Bus noss 2a. Mailing Address Applied For 65-0702631 Not Applicable 26 21 Suite Apt # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intardible tax under s. 199.032. Florida Statutes No Country 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 INCORPORATORS PLUS, INC. RISOL 1214 NO UNIVERSITY DRIVE Box Number is Not Acceptable) 82 PLANTATION FL 33322 83 84 Zip Code ろること /ANDA/e 607.0592 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the suggestions of, Section 607.0505, Florida Statutes. Pursuant to the provisions of Se office or registered agent or by SIGNATURE (NOTE: Registered Agent signature required when reinstating) stered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE THE KESSLER, GARY F 1.2 NAME MAME 127 SE 1ST AVE. STE 109 1.3 STREET ADDRESS STREET ADDRESS HALLANDALE FL 33009 1.4 CITY-ST-ZIP 0J*V-\$1-70 D PT3 Change Addition DELETE 2.1 TITLE HILF RISOLI, FRANK 2.2 NAME NAME 127 SE 1ST AVE. STE 109 2.3 STREET ADDRESS STREET ADDRESS HALLANDALE FL 33009 2. 4 CITY - ST - ZIP City St. 7.9 Addition DELETE Change 111.0 3.1 TITLE EISENBERG, DONALD 3.2 NAME NAME 127 SE 1ST AVE. STE 109 3.3 STREET ADDRESS STREET ADDRESS HALLANDALE FL 33009 34. CITY-ST-ZIP CUTY-STEZIP DELETE Change ☐ Addition THEF 4. 2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP Cally - S1 - 74P DELETE Change Addition 5.1 TITLE Title

6.4 CITY - ST - ZIP $0)^{\tau_{A}}\cdot SI\cdot Z^{\alpha}$ 14. I do hereby certify that the information supplied with this filling 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 of the receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block ent with an address.

5.2 NAME

6.1 TITLE

6 2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

MAME

THUE

NAME

STREET AUORESS

STREET ADDRESS

CITY - ST - 761

DELETE

FILED

Apr 10 1997 8:00am

Secretary of State

0112739

Change

Addition