

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000014797 (9)

1. Corporation Name

NATIONAL BAG & FILM, INC.

Principal Place of Business

Mailing Address

7312 PARK DRIVE
TAMPA FL 33610

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TAMPA FL 33610

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1997

4. FEI Number

59-3426573

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 18411 Citation St.	26 18411 Citation St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Lutz, FL	28 Lutz, FL
Zip	Zip
24 33549	29 33549
Country	Country
25	30

9. Name and Address of Current Registered Agent

GREGORY, MICHAEL C
7312 PARK DRIVE
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name	Robert E. Menendez
82 Street Address (P.O. Box Number is Not Acceptable)	18411 Citation St.
83	
84 City	Lutz, FL
85	FL
Zip Code	33549

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

(NOTE: Registered Agent signature required when reinstating)

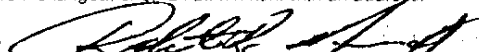
DATE

3/23/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGORY, MARLENE S	1.2 NAME	
STREET ADDRESS	4634 W. LUMB	1.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33629	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGORY, MICHAEL C	2.2 NAME	
STREET ADDRESS	4634 W. LUMB	2.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33629	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENENDEZ, SHEILA	3.2 NAME	
STREET ADDRESS	18411 CITATION STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	LUTZ FL 33459	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENENDEZ, ROBERT	4.2 NAME	
STREET ADDRESS	18411 CITATION STREET	4.3 STREET ADDRESS	
CITY - ST - ZIP	LUTZ FL 33459	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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.

SIGNATURE:



3/23/98

812-949-0741

CR2E034 (10/97)