PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FURIM. FLORIDA DEPARTMENT OF STATE APPLICATION . Katherine Harris Secretary of State FILLS DIVISION OF CORPORATIONS ECRETARY OF STATE VISION OF CORPORATIO." P9700006340S DOCUMENT # 1. Corporation Name 00 0CT **30** PM 2: 06 SUNBRITE PACKAGING COMPANY, INC. Principal Place of Business 873 WEST BAY DRIVE, #186 LARGO, FL 33770 If above addresses are incorrect in any way, line through incorrect information and enter correction below Date Incorporated or Qualified
 To Do Business in Florida
 O7/2//997 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Zip Country 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip and/or Directors 873 W. Bay Dr., #186 LARGO, FL 33770 P/D L. W. MASTEN 873 W. Bay Dr., #186 LArgo, FL 33770 D. J. MASTEN 5/D 500003447885-- -11/01/00--01105--023 ****4<u>58.</u>75 ****458. 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent 12) MASTEN 3R2E081 873 W. BAG LArgo, K/L AT 90 cept the obligations of Section 607.0505, F.S. 10. I, being appointed the registered agen corporation, am familiar with and accep Date _ 10 - 16 - 00 Signature of Registered Agent REG/STERED AGENT MUST SIGN 11. This corporation bwes the current year (See other side for information on intangible tax.) Intangible Personal Property Tax due June 30. 12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. 10-16-00 727-595-6575 SIGNATURE: JRE AND THEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR