2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State
05-24-2002 91293 002 ***150.00

DOCUMENT # P97000084197

1. Entity Name
CONCEPTS SOLUTIONS FOR WAREHOUSE AND PACKAGING, INC.

Principal Place of Business
100 SE SECOND ST 35 FL
MIAMI FL 33131

Mailing Address
P O BOX 728
MINEOLA NY 11501
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1101 E. 33rd. ST.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 139095
Suite, Apt. #, etc.

City & State: HIALEAH FL
Zip: 33013 Country: USA

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Zip: 33013 Country: USA

4. FEI Number 65-0806989 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
BERMAN WOLFE & RENNERT PA
100 SE SECOND ST 35 FL
MIAMI FL 33131

7. Name and Address of New Registered Agent
Name: Angelo, Barry & Boldt, P.A.
Street Address (P.O. Box Number Is Not Acceptable): SunTrust Center
515 East Las Olas Blvd., Ste 850
City: Fort Lauderdale FL Zip Code: 33301

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: CEO — DATE: 4/25/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete
P ROTHSTEIN, HARVEY 100 SE 24TH STREET 38TH FLOOR MIAMI FL 33131	
D POOR, NATHAN H SR 100 SE 24TH STREET 38TH FLOOR MIAMI FL 33131	
D LAGATTUTA, SANDRA 100 SE 24TH ST 38TH FLOOR MIAMI FL 33131	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #