

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088050

FILED
Sep 06, 2005
Secretary of State

Entity Name: DURAPACK INC.

Current Principal Place of Business:

6650 COOLIDGE ST
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

1491SW 18 TERR
FORTLAUDALE, FL 33312 US

Current Mailing Address:

6650 COOLIDGE STREET
HOLLYWOOD, FL 33024

New Mailing Address:

1491 SW 18 TERR
FORTLAUDERDALE, FL 33312 US

FEI Number: 65-0790000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, MARK M
11098 BISCAYNE BLVD SUITE 403
MIAMI, FL 331617486 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OVANESIAN, MARY DER
Address: 6650 COOLIDGE STREET
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OVANESIAN, MARY DER
Address: 1491 SW 18 TERR
City-St-Zip: FORTLUUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY DEROVANESIAN

PRES

09/06/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date