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FILED
May 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000102389 (8)

1. Corporation Name

PACKAGE & SHIP OF BRICKELL, INC.

Principal Place of Business

3109 GRAND AVENUE #161
MIAMI FL 33133

Mailing Address

3109 GRAND AVENUE #161
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1997

4. FEI Number

65-0807944

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$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

21 7400 SW 57th Ave

Suite, Apt. #, etc.

22 #4

City & State

23 Miami FL

24 Zip 33143

Country

25 USA

2a. Mailing Address

26 7400 SW 57th Ave

Suite, Apt. #, etc.

27 #4

City & State

28 Miami FL

29 Zip 33143

Country

30 USA

9. Name and Address of Current Registered Agent

BOWEN, JOHN
3109 GRAND AVENUE #161
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 the applicable (NOTE: Registered Agent signature required when reinstating)

4/22/98

12. OFFICERS AND DIRECTORS

TITLE U.P. ☐ DELETE

NAME TAMARA BOWEN
STREET ADDRESS 105 SHORE DR. W.
CITY-ST-ZIP Miami FL 33133

TITLE U.P. ☐ DELETE

NAME JOHN H. BOWEN
STREET ADDRESS 3109 GRAND AVE #161
CITY-ST-ZIP Miami FL 33133

TITLE U.P. ☐ DELETE

NAME ZBIDA DESOLA
STREET ADDRESS 105 SHORE DR. W.
CITY-ST-ZIP Miami FL 33133

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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

Signature of John H. Bowen

4/22/98

CR2E034 (10/97)