FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am Secretary of State DOCUMENT # P99000048721 1. Entity Name 04-22-2002 90195 029 ***150.00 PAK MAIL OF PGA, INC. Principal Place of Business Mailing Address 7100-39 FAIRWAY DR. 3452 WEST BOYNTON BEACH BOULEVARD TWWFIDDU WEST PALM BEACH FL 33418 % REX ACCT SER INC. **BOYNTON BEACH FL 33436** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0921626 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REX, JR., RAYMOND R Street Address (P.O. Box Number is Not Acceptable) 3452 W. BOYNTON BCH BLVD., STE 10 % REX ACCT SRE INC. **BOYNTON BEACH FL 33436** City Zip Code 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 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax fill; requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PTD TITLE ☐ Delete TITLE ☐ Change ☐ Addition REX, RAYMOND R JR. NAME NAME 3452 W BOYNTON BCH BLVD. STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-7IP CITY-ST-ZIP SVD TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCCABE, EDWARD NAME NAME STREET ADDRESS 3452 WEST BOYNTON BEACH BOULEVARD STREET ADDRESS CITY-ST-ZIP **BOYNTON BEACH FL 33436** CITY-ST-ZIP TITLE -TITLE: : ::= # - ☐ · Change - - ☐ · Addition-NAME MCCABE, DONNA NAME 3452 W. BOYNTON BCH BLVD., STE 10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL 33436 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #