

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90114 028 ***150.00

DOCUMENT # P99000060730
1. Entity Name
COPACKING INC.,

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1105 SW 87th Ave Suite, Apt. #, etc.		3. Mailing Address 1105 SW 87th Ave Suite, Apt. #, etc.	
City & State Miami, FL		City & State Miami, FL	
Zip 33174	Country USA	Zip 33174	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 650960161	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

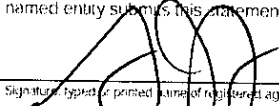
7. Name and Address of Current Registered Agent

Name
Sergio J. Guzman

Street Address (P.O. Box Number is Not Acceptable)
1105 SW 87th Ave

City
Miami FL Zip Code
33174

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  **Sergio J. Guzman** **4/22/02**
(NOT: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	Vicente Trigo - P/D 10056 Brandon Street Orlando, FL 32836	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sergio J. Guzman - Secretary 1105 SW 87th Ave Miami, FL 33174	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **Sergio J. Guzman** **4/22/02** **305-262-669 6**
SIGNATURE AND TITLE OF REGISTERED AGENT SIGNING OFFICER OR DIRECTOR Date Telephone *

CR2E034B (12/01)