

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000005402

Entity Name: SHARP PACKAGING SOLUTIONS CORPORATION**Current Principal Place of Business:**7451 KEEBLER WAY
ALLENTOWN, PA 18106**Current Mailing Address:**7451 KEEBLER WAY
ALLENTOWN, PA 18106 US**FEI Number:** 23-1989163**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPITOL CORPORATE SERVICES, INC.
515 EAST PARK AVENUE 2ND FLOOR
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR, CEO
Name O'HARA, MICHAEL
Address 7451 KEEBLER WAY
City-State-Zip: ALLENTOWN PA 18106

Title DIRECTOR, TREASURER, CFO
Name HAYES, SIMON
Address 7451 KEEBLER WAY
City-State-Zip: ALLENTOWN PA 18106

Title DIRECTOR
Name REILLY, RAY S.
Address 7451 KEEBLER WAY
City-State-Zip: ALLENTOWN PA 18106

Title DIRECTOR
Name OWENS, MICHAEL P
Address 7451 KEEBLER WAY
City-State-Zip: ALLENTOWN PA 18106

Title SECRETARY
Name SEROTA, ANDREW
Address 1100 VIRGINIA DR
 STE 200
City-State-Zip: FORT WASHINGTON PA 19034

I hereby 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 all other like empowered.

SIGNATURE: ANDREW SEROTA**SECRETARY****04/24/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date