

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004313

FILED
Feb 06, 2007
Secretary of State

Entity Name: CARDILE BROTHERS MUSHROOM PACKAGING, INC.

Current Principal Place of Business:

P.O. BOX 707
AVONDALE, PA 19311

New Principal Place of Business:

8790 GAP NEWPORT PIKE
AVONDALE, PA 19311

Current Mailing Address:

P.O. BOX 707
AVONDALE, PA 19311

New Mailing Address:

FEI Number: 23-2258137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZELLER, BRIAN
1335 NW 21ST TERRACE
MIAM, FL 33142 US

Name and Address of New Registered Agent:

ZELLER, BRIAN
1378 NW 22ND STREET
MIAMI, FL 33142 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: BRIAN ZELLER 02/06/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDILE, CHARLES E JR
Address: 540 CHURCH ROAD
City-St-Zip: AVONDALE, PA 19311

Title: VPS () Delete
Name: CARDILE, MICHAEL P SR
Address: 235 FERN RIDGE
City-St-Zip: LANDENBERG, PA 19350

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHARLES CARDILE P 02/06/2007

Electronic Signature of Signing Officer or Director Date