

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005242

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE PAIGE COMPANY CONTAINERS, INC.

Current Principal Place of Business:

400 KELBY STREET
FORT LEE, NJ 07024

New Principal Place of Business:

Current Mailing Address:

400 KELBY STREET
FORT LEE, NJ 07024

New Mailing Address:

FEI Number: 22-3036922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LEVINE, ALLAN PRESIDE
Address: 800 PALISADE AVE APT 201
City-St-Zip: FORT LEE, NJ 07024

Title: V-P () Delete
Name: LEVINE, MICHAEL V-PRES
Address: 210 E 68TH ST APT 2L
City-St-Zip: NEW YORK, NY 10065

Title: SEC () Delete
Name: CHAZIN, JONATHAN SECRETA
Address: 30 AVE AT PORT IMPERIAL #413
City-St-Zip: WEST NEW YORK, NJ 07093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V-P (X) Change () Addition
Name: LEVINE, MICHAEL V-PRES
Address: 245 E 58TH ST APT 29 B
City-St-Zip: NEW YORK, NY 10022

Title: SEC (X) Change () Addition
Name: CHAZIN, JONATHAN SECRETA
Address: 93 SCHWEINBERG DR
City-St-Zip: ROSELAND, NJ 07068

I hereby certify that the information supplied with this filing does not qualify 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: ALLAN LEVINE

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date