FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Apr 21 1998 8:00am Secretary of State

DOCUMENT # (9) **DIMENSIONAL PLASTICS CORPORATION** Principal Place of Business Mailing Address S RONALD BARNETTE S RONALD BARNETTE 1065 E 26TH ST 1065 E 26TH ST DO NOT WRITE IN THIS SPACE HIALEAH FL 33013 HIALEAH FL 33013 3. Date Incorporated or Qualified 02/09/1956 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-0902286 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible Yes 25 30 Personal Property Tax due June 30. 24 29 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent 81 Name TRAURIG.ROBERT H 1221 BRICKELL AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) 22ND FLOOR 83 **MIAMI FL 33131** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, t am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. (NO1) Hegistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. D OTHER Change Addition PD 1.1 TOUR TITLE **BARNETTE, S RONALD** NAME 1.2 NAME 1065 E 26TH ST. STREET ADDRESS 13 STREET ADDRESS HIALEAH FL CITY-ST-ZIP 1.4 C/(Y+ST-7)P DELETE Change Addition TITLE SD 2.1 TITLE TRAURIG.ROBERT H NAME 2.2 NAME 1221 BRICKELL AVE., 22ND FLOOR STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2 4 CHY- \$1-7P CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE **BAUMSTARK, DIETER** 3.2 NAME NAME 1065 E. 26 ST. STREET ADDRESS 3.3 STREET ADDRESS HIALEAH FL CITY-ST-ZIP 3 4 CITY-ST-ZIP DELETE Change Addition TITLE 4.5 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-ST-ZIP Change Addition DELETE 5.1 1111.8 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 7IP CITY-ST-ZIP TITLE DELETE 6 1 1HLE Change Addition 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 C(1Y - \$1 - Z(P CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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