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Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90037 009 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F36054

1. Entity Name
PLASTIC TUBING INDUSTRIES, INC.

C0007618

Principal Place of Business	Mailing Address
750 VULCAN RD. P.O. BOX 607356 ORLANDO, FL 32860	750 VULCAN RD. P.O. BOX 607356 ORLANDO, FL 32860

01242006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
2346 VULCAN ROAD		PO BOX 607356	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: APOPKA, FLORIDA		City & State: ORLANDO, FLORIDA	
Zip: 32703	Country: ORANGE	Zip: 32860-7356	Country: ORANGE

4. FEI Number 59-2090731 ☐ Applied F[or] ☐ Not Applic[able]

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HELLER, B.J.
116 E. CONCORD STREET
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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. I am familiar with, and ac[cept] the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MAROSCHAK, MICHAEL 2417 FOXWOOD COURT APOPKA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ad[d]
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informati[on] 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 direc[tor] 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 10 or Block [11 if] changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 1/24/06 407 298-5121