

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080015

FILED
Apr 14, 2009
Secretary of State

Entity Name: BIANPLAST & TRADING, INC

Current Principal Place of Business:

2868 NW 72 AVE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

2868 NW 72 AVE
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 26-0523000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALVERDE, MARIA M
3430 10 AV NE
NAPLES, FL 34120 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: P () Delete
Name: VALVERDE, MARIA M
Address: 3430 10 AVE NE
City-St-Zip: NAPLES, FL 34120 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: VALVERDE, MARIA M
Address: 3430 10 AVE NE
City-St-Zip: NAPLES, FL 34120 US

Title: PR () Change (X) Addition
Name: MARIA, VALVERDE M
Address: 3430 10TH
City-St-Zip: NAPLES, FL 34120 US

Title: PR () Change (X) Addition
Name: MARIA, VALVERDE
Address: 3430 10TH
City-St-Zip: NAPLES, FL 34120

Title: PR () Change (X) Addition
Name: MARIA, VALVERDE
Address: 3430 10TH
City-St-Zip: NAPLES, FL 34120 US

Title: PR () Change (X) Addition
Name: MARIA, VALVERDE M
Address: 2868 NW 72
City-St-Zip: MIAMI, FL 33122 US

Title: PR () Change (X) Addition
Name: MARIA, VALVERDE M
Address: 2868 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

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: MARIA M VALVERDE

PR

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date