

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J11521 (8)

1. Corporation Name
PLASTIGONE TECHNOLOGIES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
2814 SOUTH STREET 2814 SOUTH STREET
FT. MYERS FL 33916 FT. MYERS FL 33916
US US

3. Date Incorporated or Qualified 04/24/1986 3a. Date of Last Report 10/19/1994
4. FEI Number 59-2712878 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
22 Suite, Apt #, etc 27 Suite, Apt #, etc
23 City & State 28 City & State
24 Zip 25 Country 29 33916 30 Country

9. Name and Address of Current Registered Agent
Hieb
MICH, JERRY
2814 SOUTH STREET
FT. MYERS FL 33916
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature (typed or printed name of registered agent and title if applicable) NOTE: Registered Agent signature required when resigning DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARPAZ, AVI	12. NAME	
STREET ADDRESS	2814 SOUTH STREET	13. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL	14. CITY - ST - ZIP	
TITLE	VP	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TUCKER, JOHNE	22. NAME	
STREET ADDRESS	2014 SOUTH ST.	23. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL	24. CITY - ST - ZIP	
TITLE	PD	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEKEN, JOSEPH M. Ron Davis	32. NAME	
STREET ADDRESS	2814 SOUTH STREET 2814 South Street	33. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL 77 Myers, FL	34. CITY - ST - ZIP	
TITLE	D	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUSMAN, BRUCE	42. NAME	
STREET ADDRESS	2814 SOUTH STREET	43. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL	44. CITY - ST - ZIP	
TITLE	D	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, HOWARD	52. NAME	
STREET ADDRESS	2814 SOUTH STREET	53. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL	54. CITY - ST - ZIP	
TITLE	VP	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICH, JERRY Hieb	62. NAME	
STREET ADDRESS	2814 SOUTH STREET	63. STREET ADDRESS	
CITY - ST - ZIP	FT. MYERS FL	64. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry Hieb Jerry Hieb 4-19-95 (819) 334-2699
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Officer/Member