## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 14, 2005 08:00 AM

1. Entity Nar	MENT #P37795 nt plastics, inc.			Secretary	of State
3147 N. AN	DREWS AVE EXTENSION	iailing Address 3010 WEST W.T. HARRIS BLVD CHARLOTTE, NC 28213			
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent					Applied For Not Applicable 75 Additional Required
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE		
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 accept the obligations of registered agent.  SIGNATURE  Signature, typod 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, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			cing \$5.	5.00 May Be ded to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRECTORS  PTD BOOTH, HENRY G. JR. 5010 W.T. HARRIS BLVD. CHARLOTTE, NC VPSD WHITFIELD, OWEN H. JR.		U00000305863 04/14/05-80100-003 200.00		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5010 W.T. HARRIS BLVD. CHARLOTTE, NC CFO SCALES, ANDREW J P.O. BOX 26006 N/A CHARLOTTE, NC 28221		<u> </u>	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.  SIGNATURE:  3/3/6 5 (704) 597-8200					
SIGNATURE: HOW MAN DE LA PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CFO Day three Prone V					