

2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P15000012299

Entity Name: PROTEC BAG AMERICA INC**Current Principal Place of Business:**3275 W HILLSBORO BLVD
SUITE 306
DEERFIELD BEACH, FL 33442**Current Mailing Address:**3275 W HILLSBORO BLVD
SUITE 306
DEERFIELD BEACH, FL 33442 US**FEI Number:** 47-3042705**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OGC ASSOCIATES PA
3275 W HILLSBORO BLVD
SUITE 306
DEERFIELD BEACH, FL 33442 US*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**Officer/Director Detail :**

Title	P
Name	FABRA SIQUEIRA, PAULO C
Address	AV ANGELICA #226 - ANDAR 7
City-State-Zip:	SAO PAULO SP 01227

Title	D
Name	PEREIRA, ADILSON
Address	3275 W HILLSBORO BLVD SUITE 306
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VP
Name	PROTEC BAG COMERCIO DE MAQUINAS LTDA
Address	RUA ARMANDO PENTEADO 261
City-State-Zip:	SAO PAULO SP 01242

Title	D
Name	DELIA, NELSON
Address	3275 W HILLSBORO BLVD SUITE 306
City-State-Zip:	DEERFIELD BEACH FL 33442

I hereby 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 all other like empowered.

SIGNATURE: FABRA SIQUEIRA, PAULO C

P

10/19/2018

Electronic Signature of Signing Officer/Director Detail_____
Date