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Feb 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 301730 (8)
1. Corporation Name
PLASTIC GRAPHIX CORP

Principal Place of Business

Mailing Address

2520 SW 28TH LANE
MIAMI FL 33133

2520 SW 28TH LANE
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 4975 E 10TH AVE	26 4975 E 10TH AVE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22	27		
City & State Hialeah FLA		City & State Hialeah FLA	
Zip 33013		Zip 33013	
Country USA		Country USA	

3. Date Incorporated or Qualified 02/08/1966	
4. FEI Number 59-1355719	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
DEZINNO, THEOPHILE 33 SHORE DRIVE NORTH MIAMI FL 33133	

10. Name and Address of New Registered Agent	
81 Name JAMES E. TICE	85 Zip Code 33031
82 Street Address (P.O. Box Number is Not Acceptable) 16220 SW 28TH ST	
83 City HOMESTEAD FLA	
84 City FL	85 Zip Code 33031

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, print or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	NAME
DEZINNO, THEOPHILE L	DEZINNE, STELLA
STREET ADDRESS	STREET ADDRESS
33 SHORE DR N	33 SHORE DE N
CITY-ST-ZIP	CITY-ST-ZIP
MIAMI FL	MIAMI FL
TITLE	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	1.2 NAME
JAMES E. TICE	16220 SW 28TH ST
1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
HOMESTEAD FLORIDA	33031
2.1 TITLE	2.2 NAME
FRANCISCO VERAS	4975 E 10TH AVE
2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
HIALEAH FLA	33013
3.1 TITLE	3.2 NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
4.1 TITLE	4.2 NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
5.1 TITLE	5.2 NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
6.1 TITLE	6.2 NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

James E. Tice

1/8/97 305 687 5696

CR2E034 (10/97)