2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 555277

Title:

Name: Address:

City-St-Zip:

Entity Name: A & M ENGINEERING PLASTICS, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	H STREET, N . 337771419				
Current Mailing Address:			New Mailing Address:		
	H STREET, N . 337771419				
FEI Number:	59-1775901	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
CATON, AL 10521 75TH LARGO, FL		US			
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	!E:				
Electronic Signature of Registered Ager			ent	Date	
Election Cam	paign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (CATON, ALLEN 10521 75TH ST LARGON, FL 3	REET, NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (ROBINSON, LA 10521 75TH ST LARGO, FL 33	⁻ . N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (BLEVINS, SHA 10521 75TH ST LARGO, FL 33	⁻ . N	Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALLEN M. CATON PD 01/08/2008

() Delete

SHARON, BLEVINS

10521 75TH ST. N

LARGO, FL 337771419 US

() Change () Addition