2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1. Finity Name DIMENSIONS IN PLASTICS, INC.	2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)					FILED Mar 27, 2008 8:00 am	
DIMENSIONS IN PLASTICS, INC. Principal Place of Buseness						Secretary of State	
1065 EAST 26 STREET HALEAH FL 33013	DIMENSI	ONS IN PLASTICS, INC.				130.00	
### HALEAH FL 33013 #### Procious Place of Business - No. P.C. 854.4 2. Finding Place of Business - No. P.C. 854.4 Safe, April 4, etc. Suite, April 4, etc. Suite, April 4, etc	Principal Plac	e of Business	Mailing Address	'			
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City & State County County City County City Ci	2. Principal Place of Business - No P.C. Box # 3. Mailing Address						
No.T. APPLICABLE S8.75 Additional ree Required S8.7	Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E034 (10/07)	
6. Name and Address of Current Registered Agent TRAURIG: ROBERT H. 1221 BRICKELL AVENUE, 22ND FLOOR MIAMI FL 33131 City FL Zip Codo 8. The access named entire submiss the statement for the purpose of changing its registered agent, or cost, in the State of Books, I am familiar with, and accept the obligations of registered agent. Or cost, in the State of Books, I am familiar with, and accept the obligations of registered agent. SIGNATURE **TILE NOW!!! FEE IS \$150.00 **After May 1, 2008 Fee Will Be \$550.00 **Make Check Payable to Florida Department of State 10. OFFICIES AND DIRECTIONS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 11 **BILE DP OFFICERS AND DIRECTIONS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 11 **BILE ARRETTE, S. RONALD **BILE ANDRESS 1005 E. 28TH ST. 1017 ST.29 MIALEAH FL 1020 Deek 1031 Addition 1035 E. 28TH ST. 1040 Deek 1055 E. 28TH ST. 1075 ST.29 MIALEAH FL 1084 DEEK AURISIS 1075 ST.29 MIALEAH FL 30313 1085 B. 28TH ST. 1096 Deek 1084 DEEK AURISIS 1075 ST.29 MIALEAH FL 30313 1086 Deek 1086 Deek 1086 DEEK ST. 1086 DEEK AURISIS 1097 ST.29 1096 DEEK 1086 DEEK AURISIS 1097 ST.29 1096 DEEK 1097 ST.29 10	City & State		City & State			I NOTADDICADIE	
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1221 BRICKELL AVENUE, 22ND FLOOR MIAMI FL 33131 City FL Zip Code 8. The above named enery submiss this statement for the purpose of changing its registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of registered agent, or both, in the State of Pronta. I am familiar with, and accept the chiligalities of Prontations of Prontations of Prontations.	TRAUDIO BORERT II			Name	Name		
S. 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 displacions of registered agent. Significations of registered agent.	1221 BRICKELL AVENUE, 22ND FLOOR			Street	Street Address (P.O. Box Number is Not Acceptable)		
SIGNATURE				City	City FL Zip Code		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature snall 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: