

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001253

FILED
Jun 23, 2009
Secretary of State

Entity Name: ROTH GLOBAL PLASTICS INC.

Current Principal Place of Business:

ONE GENERAL MOTORS DR
SYRACUSE, NY 13211

New Principal Place of Business:

Current Mailing Address:

PO BOX 245
SYRACUSE, NY 13211

New Mailing Address:

FEI Number: 20-8679707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ROTH, MANFRED
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: D () Delete
Name: ROTH, CLAUS-HINRICH
Address: POSTFACH 21 66
City-St-Zip: 32530 DAUTPHETAL GERMANY, XX

Title: VP () Delete
Name: LAUER, THERESA
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: VP () Delete
Name: BROWN, JOSEPH
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: S () Delete
Name: JAEGER, MATTHIAS
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: CEO () Delete
Name: DREWNIOK, JOCHEN
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: LAUER, THERESA
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: S (X) Change () Addition
Name: BROWN, JOSEPH
Address: ONE GENERAL MOTORS DR
City-St-Zip: SYRACUSE, NY 13211

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: THERESA LAUER

S

06/23/2009

Electronic Signature of Signing Officer or Director

Date