

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 04 1996 8:00 am
Secretary of State

DOCUMENT # F48422 (2)

1. Corporation Name

SECURITY PLASTICS, INC.



Principal Place of Business

14427 N.W. 60 AVE.
MIAMI LAKES FL 33014
US

Mailing Address

14427 N.W. 60 AVE.
MIAMI LAKES FL 33014
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

COHAN, NORMAN H.
14427 N.W. 60 AVE.
MIAMI FL 33014

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

MIAMI LAKES

FL

85 Zip Code

3. Date Incorporated or Qualified
09/28/1981

3a. Date of Last Report
03/27/1995

4. FEI Number

59-0749148

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME COHAN, NORMAN H
STREET ADDRESS 14427 NW 60TH AVE
CITY-ST-ZIP MIAMI FL

TITLE FO ☐ DELETE

NAME VAINSTEIN, ISRAEL
STREET ADDRESS 14427 NW 60TH AVE
CITY-ST-ZIP MIAMI FL

TITLE VP ☐ DELETE

NAME NELSON, RODRIGUEZ
STREET ADDRESS 14427 NW 60TH AVENUE
CITY-ST-ZIP MIAMI FL

TITLE VP ☐ DELETE

NAME ENIDIO, GOMEZ
STREET ADDRESS 14427 NW 60TH AVENUE
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

MIAMI LAKES, FL 33014
CHIEF FINANCIAL OFFICER (CFO)

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

MIAMI LAKES, FL 33014
EXECUTIVE VICE PRESIDENT (EVP)

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

MIAMI LAKES, FL 33014
EXECUTIVE VICE PRESIDENT (EVP)

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

MIAMI LAKES, FL 33014

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96
Date

305/364-7721
Daytime Phone #

CR2E034 (12/95)