2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr. 19, 2004 08:00 AM Secretary of State

CR2E034 (10/03)

DOCUMENT # F9200 1. Entity Name MACRO PLASTICS, INC.						
Principal Place of Business 2250 HUNTINGTON DRIVE FAIRFIELD, CA 94533	Mailing Address 2250 HUNTINGTON DRIVE FAIRFIELD, CA 94533					



DO	NOT WRITE IN THIS SPACE	-	4. FEI Number	 Applied For
			68-0285009	 Not Applicat
			5. Certificate of Status Desired	\$8.75 Additional Fee Required

03252004

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

No Chg-P

	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	d office or registered agent, or bo	th, in the State of Florida, I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it	t andicable (NOTE Registered	Agent signature required when reinstating)	DATE
	anginetic, system of printed indicate of registerior significant	(1002)		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	cing \$5.00 May Be	U00000117764
10.	OFFICERS AND DIREC	TORS		U4/15/U4-60055-004-150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SAUBOLLE, PAUL G 2250 HUNTINGTON DRIVE FARIFIED, CA 94533			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BRANDT, PATRICK 2250 HUNTINGTON DR. FAIRFIELD, CA 94533			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. –	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		area-	IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
THE NAME STREET ADDRESS CITY-ST-ZIP	ΛΛ			
12. I hereby o	certify that the information supplied with this fil	ing does not qualify for the exen	aption stated in Section 119.07(3)	(i), Florida Statutes. I further certify that the information

indicated on this report of so of the corporation or the re-changed, or on an attachm and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director Alto execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if PAUL SAUBOLLE

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR ORIECTOR