2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 11, 2005 8:00 am Secretary of State 03-11-2005 90315 028 ***150.00

Mailling Address Applit 7 kB Applied For Applit 7 kB Applied For Applied F	DOCUMENT # F9800003077 1. Entity Name RICARD PLASTICS, INC.					03-11-2005 90315 028 ***150.00			150.00	
CLRK, N) 07066 CLARK,	•			·				~~~	1161	
2. Principal Place of Elusioness	SUITE 7 & 8		SUITE 7 & 8			3002412				
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City & State	2. Principal P	lace of Business	3. Mailing Address	Mailing Address						
Zip Country Zip Country 5: 22-2058343	Suite, Apt. #, etc.		Suite, Apt. #, etc.			02172005	Chg-P	CR2E034 (10/03)	
Step	City & State		City & State							
STERN, IRA STERN, IRA STORYAL CIRCLE JUPITER, FL 33477 B. The above named entry publish in is statement toy the purpose of changing its registered office or registered agent, or both, in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent, or both), in the State of Rorica. I am familiar with, and accept the obligations of (registered agent). SIGNATURE Agent agent agent agent agent agent agent agent registered agent, or both, in the State of Rorica. I am familiar with, and accept the obligations of (registered agent). If the state of Rorica is a familiar with, and accept the obligations of (registered agent). If the State of Rorica is a familiar with, and accept the obligations of (registered agent). If the state of Rorica is a familiar with, and accept the obligation of (registered agent). If the state of Rorica is a familiar with, and accept the obligation of (registered agent). If the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the obligation of the state of Rorica is a familiar with, and accept the state of Rorica is a familiar with, and accept the state of Rorica is a familiar with, and accept the state of Rorica is a f	Zip	Country	Zip	Country	1			□ \$8.75 A	dditional	
STERN, IRA 1672S PORT ROYAL CIRCLE JUPITER, FL 33477 Street Address IP.O. Box Number is Not Acceptable) JUPITER, FL 33477 Street Address IP.O. Box Number is Not Acceptable) JUPITER, FL 33477 B. The above named entiphysichrists this statement for the purpose of changing its registered office or registered agent, or both, in the State of Roida. The obligations or registered agent, or both, in the State of Roida. SIGNATURE Supply types or physical agent and life if state, as it is a special agent and life if state, as it is a special agent and life if state, as it is a special agent and life if state, as it is a special agent or both, in the State of Roida. FLE NOWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Thus Fille NoWITH FEE IS \$150.00 9. Election Campaign Financing Street Address To OFFICERS AND DIRECTORS III. Added to Fees 10. CFFICERS AND DIRECTORS III. Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. Change Addelion NoWE STREET ADDRESS CFT ST JP FILLENGTON, NJ 08822 THE NOWE STREET ADDRESS CFT ST JP FILLENGTON, NJ 08822 THE NOWE STREET ADDRESS CFT ST JP FILLENGTON, NJ 08822 THE NOWE STREET ADDRESS CFT ST JP FILLENGTON, NJ 08822 THE NOWE STREET ADDRESS CFT ST JP STREET ADDRESS CFT		6. Name and Address of Current I	Registered Agent			7. Name and	Address of New F			
Sirect Address (P.O. Box Number is Not Acceptable) Interpretation Part P	STERN IRA				Name Lenora Silvers					
The above named entity jubinitis inis statement to the obligations of legistated agent. SIGNATURE Sunday price of price of price purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of legistated agent. SIGNATURE Sunday price of price	16725 PORT ROYAL CIRCLE				Street Address (P.O. Box Number is Not Acceptable)					
B. The above named entity pubmits 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 obligations of registered agent. SIGNATURE SIGNATUR	JUPITER, FL 33477				14426 Amberly Lane 208					
B. The above named entityl pubmits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE					City Del Co	7 Zio Codo				
SIGNATURE And a process of prices a name of replaced Signatures. FILE NOW!!! FEE IS \$150.00 P. Election Comparign Financing Trust Fund Contribution. S5.00 May Be Added to Fees Added	8. The above named entire 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									
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$530.00 OFFICERS AND DIRECTORS 11. ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 1) TITLE NAME STREET ADDRESS CITY-ST-2P	ine durigations of registered agent.									
## FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00 After May 1, 2005 Fee will be \$350.00 Trust Fund Contribution. 10.	SIGNATURE Shindby typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rendstring) DATE									
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section #19.07(3)(i). Florida Statutes, I further certify that the information		· · · · · · · · · · · · · · · · · ·		.L				***************************************		

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with en address, with all other like empowered.

AND TYPED OR PRINTED NAME OF MANING OFFICER OR DIRECTOR

203.21,1383