2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000003825

1. Entity Name
PERFORMANCE POLYMERS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
36 RAGLIN PLACE CAMBRIDGE, ONTARIO CANADA N1R7J2,	36 RAGLIN PLACE CAMBRIDGE, ONTARIO CANADA N1R7J2,

DO NOT WRITE IN THIS SPACE

01292004 No Chg-P CR2E034 (10/03)

4. FEI Number
98-0205638
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FISHER & SAULS, P.A.
100 SECOND AVENUE SOUTH, SUITE 701
ST. PETERSBURG, FL 33701

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8. 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 obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when mandated)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

UD00000046310
02/11/04-80097-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	STEELE, GORDON W
STREET ADDRESS	36 RAGLIN PLACE
CITY-ST-ZIP	CAMBRIDGE, ONT., CANADA,
TITLE	VST
NAME	VAN KOUGHNET, GORDON
STREET ADDRESS	36 RAGLIN PLACE
CITY-ST-ZIP	CAMBRIDGE, ONT., CANADA,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 an address, with all other like empowered.

SIGNATURE: GORDON VAN KOUGHNET 1/29/04 519-622-1792
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Vice-President — DATE — TELEPHONE NUMBER