2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H28974

Entity Name: POLY-PLY CORP.

FILED Apr 02, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|-----------------------------------|
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1175 NW 159 DR. 5840 SW 119TH STREET CORAL GABLES, FL 33156

Current Mailing Address: New Mailing Address:

1175 NW 159 DR. 5840 SW 119TH STREET CORAL GABLES, FL 33156

FEI Number: 59-2466399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

USTAEGUI, OSWALDO JR.

1175 NW 159 DR.

MIAMI, FL 33169 US

CORPCO, INC.

2699 S. BAYSHORE DRIVE

7TH FLOOR

MIAMI, FL 33133 US

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: E.ENGLISH, VP 04/02/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Delete Title: () Change () Addition

 Name:
 USATEGUI, OSWALDO, J, R.
 Name:

 Address:
 1175 NW 159 DR.
 Address:

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:

Title: VP () Delete Title: P (X) Change () Addition
Name: SMYRLES, COLETTE Name: SMYRLES, COLETTE

Address: 1175 NW 159 DR Address: 5840 SW 119TH STREET

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 1175 NW 159 DR.
 Address:
 5840 SW 119TH STREET

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 CORAL GABLES, FL 33156

Title: VP () Delete Title: VP (X) Change () Addition

Name: LYNN, JORGE Name: LYNN, JORGE

 Address:
 1175 N.W. 159 DR.
 Address:
 5840 SW 119TH STREET

 City-St-Zip:
 MIAMI., FL 33169
 City-St-Zip:
 CORAL GABLES, FL 33156

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: C.SMYRLES P 04/02/2008