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**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H38393

(5)

**FILED** Apr 08 1998 8:00am Secretary of State

INTERNATIONAL PLASTICS MACHINERY, INC. Principal Place of Business Mailing Address 9100 NW 58 ST 9100 NW 58 ST MIAMI FL 33178-1610 MIAMI FL 33178-1610 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/15/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-249851 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SULA. WALTER 13200 CORONADO TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **NORTH MIAMI FL 33181** 83 84 City Zip Code 65 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, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE TITLE ☐ Change ☐ Addition 1.1 TITLE SULA, WALTER NAME 1.2 NAME 13200 CORONADO TERRACE STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE MILE Change Addition 2.1 TITLE DEAN, NONA NAME 2.2 NAME 13200 CORONADO TERR STREET ADDRESS 2.3 STREET ADDRESS N. MIAMI FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NUAF 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliented 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 exemption of the exe

SIGNATURE:

305)593-6502