## **2008 FOR PROFIT CORPORATION**

## **FILED** ANNUAL REPORT Mar 24, 2008 08:00 A Secretary of State **DOCUMENT # H69858** 1. Entity Name CONSUMABLE PLASMA PRODUCTS, INC. Principal Place of Business Mailing Address 130 SOUTH ROAD 130 SOUTH ROAD CANAAN, NH 03741 CANAAN, NH 03741 03192008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FÉI Number 02-0402162 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCGRATH, BRENDA KAYE DO NOT WRITE 320 10TH AVE. VERO BEACH, FL 32962 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required whon reinstation) DATE U000000867877 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 04/08/08-80090-002 150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME MCGRATH, BRENDA K. STREET ADDRESS 320 10TH AVE. CITY-ST-ZIP VERO BEACH, FL TITLE NAME MCGRATH, DAVID M. STREET ADDRESS 320 10TH AVE. CITY-ST-ZIP VERO BEACH, FL TITLE NAME STREET ADDRESS

## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP