

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47850

FILED
Jan 21, 2005
Secretary of State

Entity Name: WINSLOW MICROPLASTICS CORPORATION

Current Principal Place of Business:

8264 NW 68 STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8264 NW 68 STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 59-2779830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRATS FERNANDEZ & CO
2121 PONCE DE LEON BLVD., STE 240
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SAUL, ADOLFO
Address: 16400 COLLINS AVE SUITE 1541
City-St-Zip: MIAMI, FL 33160

Title: VP () Delete
Name: SAUL, NORA A
Address: 16400 COLLINS AVE SUITE 1541
City-St-Zip: MIAMI, FL 33160

Title: S () Delete
Name: SAUL, SEBASTIAN E
Address: 16400 COLLINS AVE SUITE 1541
City-St-Zip: MIAMI, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SAUL, ADOLFO
Address: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

Title: VP (X) Change () Addition
Name: SAUL, NORA A
Address: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

Title: S (X) Change () Addition
Name: SAUL, SEBASTIAN E
Address: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SEBASTIAN SAUL

S

01/21/2005

Electronic Signature of Signing Officer or Director

Date