

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47850

FILED
Apr 11, 2006
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:

20255 NE 15TH CT
MIAMI, FL 33179

Current Mailing Address:

8264 NW 68 STREET
MIAMI, FL 33166

New Mailing Address:

20255 NE 15TH CT
MIAMI, FL 33179

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: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SAUL, GABRIEL E
Address: 20255 NE 15TH CT
City-St-Zip: MIAMI, FL 33179

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

DP

04/11/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date