## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K87605

H & D PLASTIC PRODUCTS, INC.

	,	
Principal Place of Business	Mailing Address	
8026 LEO KIDD AVE PORT RICHEY FL 34668	8026 LEO KIDD AVE PORT RICHEY FL 34668	
Principal Place of Business Total	2a. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

## **FILED** Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/12/1989 4. FFI Number Applied For 59-2945928 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes Yes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WOOD, DOROTHY R. 8026 LEO KIDD AVE Street Address (P.O. Box Number is Not Acceptable) PORT RICHEY FL 34668 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition WOOD, DOROTHY R. 1.2 NAME NAME 8026 LEO KIDD AVE STREET ADDRESS 1.3 STREET ADDRESS PORT RICHEY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP KOELETE 2.1 TITLE \_\_ Change Addition TITLE NAME WOOD, CARMEN 2.2 NAME 8026 LEOO KIDD AVE STREET ADDRESS 2.3 STREET ADDRESS PT RICHEY FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE WOOD, HERBERT 3.2 NAME NAME 8026 LEO KIDD AVE. STREET ADORESS 3.3 STREET ADDRESS PORT RICHEY FL CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TiTI F 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change \_\_ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the Information indicated on this annual report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

AND DOROTHY TO WOOD SIGNATURE.

1/22/98