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FILED

Feb 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L12808

(6)

1. Corporation Name

K & I CREATIVE PLASTICS, INC.

Principal Place of Business

582 NIXON STREET
JACKSONVILLE FL 32204-3010

Mailing Address

582 NIXON STREET
JACKSONVILLE FL 32204-3010

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1989

4. FEI Number

59-2968459

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

GRAY, ELIZABETH I.
582 NIXON STREET
JACKSONVILLE FL 32211-7595

10. Name and Address of New Registered Agent

81 Name SYLVIA B OSTERMAN
82 Street Address (P.O. Box Number is Not Acceptable)
582 NIXON STREET
83
84 City JACKSONVILLE FL 85 Zip Code 32204

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

Sylvia B. Osterman
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D
NAME GRAY, ELIZABETH I.
STREET ADDRESS 582 NIXON ST.
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
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CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/DIRECTOR ☐ Change ☒ Addition
1.2 NAME SYLVIA B OSTERMAN
1.3 STREET ADDRESS 582 NIXON STREET
1.4 CITY-ST-ZIP JACKSONVILLE FL 32204

2.1 TITLE SECRETARY/TREASURER ☐ Change ☒ Addition
2.2 NAME PETER R OSTERMAN
2.3 STREET ADDRESS 582 NIXON STREET
2.4 CITY-ST-ZIP JACKSONVILLE, FL 32204

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 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.

SIGNATURE:

Sylvia B. Osterman

2-17-98

CR2E034 (10/97)

**UNANIMOUS WRITTEN CONSENT IN LIEU OF A SPECIAL MEETING
BY THE BOARD OF DIRECTORS OF
K & I CREATIVE PLASTICS, INC.**

The undersigned, being all of the Directors of K & I CREATIVE PLASTICS, INC., a Florida corporation (the "Corporation"). Pursuant to the Florida Statutes, the undersigned hereby consent to the adoption of the following resolutions by this instrument in lieu of a formal meeting of the Board of Directors:


RESOLVED, that the registered agent of the Corporation be, and hereby is, changed from Elizabeth I. Gray to SYLVIA B OSTERMAN

RESOLVED FURTHER, that the registered office of the Corporation remain at 582 Nixon Street, Jacksonville, Florida 32204-3010.

RESOLVED FURTHER, that the officers of the Corporation be, and they hereby are, authorized and directed to file a Statement of Change of Registered Agent and Registered Office with the Secretary of State of Florida and to take such actions and execute such documents as shall be necessary or convenient for the purposes of carrying out the foregoing resolutions.

DATED as of 1st day of JANUARY, 1998.


Name: SYLVIA B OSTERMAN PRESIDENT


Name: Peter R OSTERMAN JR
SECRETARY/TREASURER

Name: _____

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CITY-ST-ZIP

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 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.

SIGNATURE: 

2-16-98 407-843-3984