

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 28, 2004 8:00 am**  
**Secretary of State**

07-28-2004 90016 049 \*\*\*558.75

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<b>DOCUMENT # P00000045315</b> 1. Entity Name <b>PLASTICALLY ANYTHING, INC.</b>					
Principal Place of Business <b>3532 BARREL SPRINGS DR</b> <b>ORANGE PARK, FL 32073 US</b>			Mailing Address <b>3532 BARREL SPRINGS DR</b> <b>ORANGE PARK, FL 32073</b>		
2. Principal Place of Business <b>463 Sandpiper Dr</b> Suite, Apt. #, etc. <b>Satellite Beach, FL 32937</b> City & State		3. Mailing Address <b>463 Sandpiper Dr</b> Suite, Apt. #, etc. <b>Satellite Beach, FL 32937</b> City & State		06022004 Chg-P CR2E034 (10/03)	
Zip <b>32937</b> Country <b>USA</b>		Zip <b>32937</b> Country <b>USA</b>		4. FEI Number <b>59-3646820</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>PEEBLES, HENRY G III</b> <b>3532 BARREL SPRINGS DR</b> <b>ORANGE PARK, FL 32073</b>			7. Name and Address of New Registered Agent Name <b>Henry G. Peebles III</b> Street Address (P.O. Box Number is Not Acceptable) <b>463 Sandpiper Dr</b> City <b>Satellite Beach</b> <b>FL</b> Zip Code <b>32937</b>		
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 <u>Henry G. Peebles III</u> DATE <u>7-25-04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO PEEBLES, H. GREG III 3532 BARREL SPRINGS DR ORANGE PARK, FL 32073		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEEBLES, MARIA A 3532 BARREL SPRINGS DR ORANGE PARK, FL 32073		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 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 persons empowered.					
SIGNATURE: <u>Henry G. Peebles III</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>7-25-04</u> Daytime Phone # <u>904-234-1008</u>		