

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052404

Entity Name: PARRAS PLASTICS, INC.

FILED
May 15, 2009
Secretary of State

Current Principal Place of Business:

13894 SW 139 CT
MIAMI, FL 33186

New Principal Place of Business:

13894 SW 139 CT
MIAMI, FL 33186 US

Current Mailing Address:

13894 SW 139 CT
MIAMI, FL 33186

New Mailing Address:

13894 SW 139 CT
MIAMI, FL 33186 US

FEI Number: 31-1775205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRA, OSQUEL
13894 SW 139 CT
MIAMI, FL 33186 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OSQUEL, PARRA
Address: 14223 SW 155 TERR
City-St-Zip: MIAMI, FL 33177

Title: VP () Delete
Name: PARRA, OVIEL
Address: 9232 SW 149 PL
City-St-Zip: MIAMI, FL 33196

Title: T (X) Delete
Name: PARRA, DAYRIS RUFINA
Address: 13894 SW 139 CT
City-St-Zip: MIAMI, FL 33186

Title: T (X) Delete
Name: TAMAYO, OSQUEL P
Address: 13894 SW 139 CT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OSQUEL, PARRA
Address: 14223 SW 155 TERR
City-St-Zip: MIAMI, FL 33177 US

Title: VP (X) Change () Addition
Name: PARRA, OVIEL
Address: 9232 SW 149 PL
City-St-Zip: MIAMI, FL 33196 US

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 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: OSQUEL PARRA

PD

05/15/2009

Electronic Signature of Signing Officer or Director

Date