4/3/02

FILED
May 12, 2002 8:00 am
Secretary of State

04-03-2002 90037 009 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000098932

1. Entity Name

PLASTI-BLOCS INT'L CORP.

DO NOT WRITE IN THIS SPACE

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1401 DEWEY STREET	1401 DEWEY STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: HOLLYWOOD, FL	City & State: HOLLYWOOD, FL
Zip: 33020 Country: USA	Zip: 33020 Country: USA

4. FEI Number: 65-1146349 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: FERNAND LAMOTHE

Street Address (P.O. Box Number is Not Acceptable): 1401 DEWEY STREET

City: HOLLYWOOD FL Zip Code: 33020

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.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP
NAME	KEITZMAN LOU
STREET ADDRESS	400 WILLOW WINDS
CITY - ST - ZIP	COLUMBIA, SC 29210-4460
TITLE	DV
NAME	TREMBLAY JEAN FRANCOIS
STREET ADDRESS	827 HOLLYWOOD BEACH BLVD
CITY - ST - ZIP	HOLLYWOOD, FL 33009
TITLE	D
NAME	MILLER SYLVIE
STREET ADDRESS	827 HOLLYWOOD BEACH BLVD
CITY - ST - ZIP	HOLLYWOOD, FL 33009
TITLE	DT
NAME	FILIATRAULT MICHEL
STREET ADDRESS	3300 NSR 7 F-534
CITY - ST - ZIP	HOLLYWOOD, FL 33021
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Jean-François Tremblay 03/11/02 954-920-0918

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STF FL32381F.1