2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004
Secretary of State

DOCUMENT# P01000118099

Entity Name: POLYMER SALES SOLUTIONS, INC.

Current Principal Place of Business:

2296 FLORIDA STREET
WEST PALM BEACH, FL 33405

New Principal Place of Business:

2296 FLORIDA STREET
WEST PALM BEACH, FL 33406

Current Mailing Address:

2296 FLORIDA STREET
WEST PALM BEACH, FL 33405

New Mailing Address:

2296 FLORIDA STREET
WEST PALM BEACH, FL 33406

FEI Number: 65-1159891 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEHNEN, COLLEEN
2296 FLORIDA STREET
WEST PALM BEACH, FL 33405

Name and Address of New Registered Agent:

LEHNEN, COLLEEN
2296 FLORIDA STREET
WEST PALM BEACH, FL 33406

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: COLLEEN LEHNEN 03/12/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: LEHNEN, COLLEEN
Address: 2296 FLORIDA STREET
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete
Name: LEHNEN, COLLEEN
Address: 2296 FLORIDA STREET
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: LEHNEN, COLLEEN
Address: 2296 FLORIDA STREET
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D (X) Change ( ) Addition
Name: LEHNEN, COLLEEN
Address: 2296 FLORIDA STREET
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the 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 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: COLLEEN LEHNEN PRES 03/12/2004
Electronic Signature of Signing Officer or Director Date