## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000118099

Entity Name: POLYMER SALES SOLUTIONS, INC.

2296 FLORIDA STREET

WEST PALM BEACH, FL 33406

Address:

City-St-Zip:

FILED Apr 12, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2296 FLORIDA STREET WEST PALM BEACH, FL 33406 **Current Mailing Address: 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: Name and Address of New Registered Agent: LEHNEN, COLLEEN 2296 FLÓRIDA STREET WEST PALM BEACH, FL 33406 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition LEHNEN, COLLEEN Name: Name: 2296 FLORIDA STREET Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: Title: () Change () Addition () Delete LEHNEN, COLLEEN Name: Name:

Address:

City-St-Zip:

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 04/12/2005