FILED Aug 29, 2003 8:00 am Secretary of State 08-29-2003 90090 043 ***150.00

DOCUMENT # P02000066430 1. Entity Name PLASTERWERKS, INC. Principal Place of Business 1361 SW EVERGREEN LANE PALM CITY, FL 34990 PALM CITY, FL 34990 PALM CITY, FL 34990						90153257	
						III DE	
2. Principal Pi	lace of Business	3. Mailing Address					
Suite, Apt.		Sulte, Apt. #, etc.				CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 30 = 008 0 88.4 Applied For Not Applicable		
Zip	Country	Zip	Coun	try		entificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent	Agent			me and Address of New Registered Agent	
WHITE, TRA 1361 SW EV PALM CITY,	VERGREEN LANE		Street Address		(P.O. Box Number is Not Acceptable)		
				City		FL Zip Code	
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 Signature, types or printed name of expansion and time if applicable. (NOTE Replaced Agents special Agents special when ministrating) ONE							
## FILE NOW!! FEE IS \$150.00 ARe may 1,2003 Fee will be \$550.00 ARe may 1,2003 Fee will be \$550.00 ARe may 1,2003 Fee will be \$550.00 Trust Fund Contribution. Added to Make Check Payable to Florida Department of State							
10.	OFFICERS AND	DIRECTORS	11.		ADD	ITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STHEET ADDRESS GITY-ST-ZIP	D WHITE, TRACY 1361 SW EVERGREEN LANE PALM CITY, FL 34990	□ Delete		1	•	Change	
TITLE NAME STREET ADDRESS	,	□ Delete	RAM STRE	TITLE NAME STREET ADDRESS CITY-ST-2IP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-2P		□ Delete	TITLI NAM Stre			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP		☐ Delete	TALL NAME STREET		•	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP		☐ Delete				☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(S)(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 cooperation 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 like empowered.							
SIGNATURE: SIGNATURE AND TYPE D'ON-PRINTED NAME OF SIGNING OFFICER OR DIRECTION SIGNATURE AND TYPE D'ON-PRINTED NAME OF SIGNING OFFICER OR DIRECTION DAM DOWN PRINTED NAME OF SIGNING OFFICER OR DIRECTION							

Alfachment

PLASTERWERKS, INC. 1361 SW EVERGREEN LANE PALM CITY, FL 34990

4 PO200066430

August 15, 2003

Department of State Division of Corporations Corporate Filings PO BOX 6327 Tallahassee, FL 32314

RE: 2003 UBR for "Plasterwerks, Inc."

Dear Department of State:

My name is Tracy White and I am one of the principals of Plasterwerks, Inc. I started my corporation in June 2002 and hired an accountant in June 2003. My accountant asked us if I filed my Uniform Business Report with the State and paid \$150.00 along with the form. I told him that I had never received that form and I did not change my address. I apologize for not knowing to send this money and have completed the form my accountant gave me from your on-line service. I never received this form and would never want to be late in filing the State required form. I am respectfully requesting that you accept my \$150.00 plus my signed UBR for tax year 2003. Again, please understand that I would have paid the \$150.00 prior to May 1, 2003 if I had received the form in the mail. Thank you for your time and consideration.

Sincerely,

Tracy White, Director