2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111228

Entity Name: POLYPLANT MARKETING, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2255 GLADES ROAD 5723 HAMILTON WAY SUITE 112E BOCA RATON, FL 33496 BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

2255 GLADES ROAD 5723 HAMILTON WAY SUITE 112E BOCA RATON, FL 33496 BOCA RATON, FL 33431

FEI Number: 33-1027135 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:

KALLAN, MARK L MR.
19999 BACK NINE DRIVE 5723 HAMILTON WAY
BOCA RATON, FL 33498 US BOCA RATON, FL 33496 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: MARK KALLAN 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 KALLAN, MARK
 Name:
 KALLAN, MARK L MR.

 Address:
 1999 BACK NINE DRIVE
 Address:
 5723 HAMILTON WAY

Address: 19999 BACK NINE DRIVE Address: 5723 HAMILTON WAY
City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33496

() Delete Title: **VPS** Title: **VPS** (X) Change () Addition BRESLAUER, GERALD Name: BRESLAUER, GERALD Name: 2255 GLADES RD, SUITE 112E 5723 HAMILTON WAY Address: Address: BOCA RATON, FL 33431 BOCA RATON, FL 33496 City-St-Zip: 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: MARK KALLAN MR. 04/29/2004