FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000125906

1. Entity Name DELPLAST, INC.



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Principal Place of Business 7100 N.W. 12 STREET 103		Mailing Address 7100 N.W. 12 STREET 103						Y		and the second s	7
MIAMI FL 33126 US		MIAMI FL 33126 US									
2. Principal Place of Business		3. Mailing Address						1884  693 61)   B146   1644   B044   B044	10141 31617 11071	1111 1111 11	HI BULUBU
Suite, Apt. #, etc.		Suite, Apt. #, etc.						CHECK HERE IF	MAKING CH	HANGES	mR\$
City & State	3	City & State				4. F	27-00394°	79	_	olied For Applicable	
Zip	Country Zip		Country		ntry		5. C	ertificate of Status Desired	□ \$8	.75 Add	tional
	6. Name and Address of Current	Registere	d Agent				7. N	ame and Address of New Re			
VIVERO, JOANNE					Name						
1627 BRIC					Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
2706.											
MIAMI FL (	33129				City		<del></del> -		FL	Zip Code	
8. The above	named entity submits this statement fo	r the purp	ose of changing it	s register	ed office or	registere	ed age	nt, or both, in the State of Flori	da. Lam fam	iliar with, a	ind accept
the obligations of registered agent.											
SIGNATURE .	Signature, typed or printed name of registered agent	and title if app	oficable. (MC	TE, Register	èd Agent signatu	re required	when rein	nstating)	DATE		<del></del>
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			·					Election Campaign Fina     Trust Fund Contribution.			May Be to Fees
10.	OFFICERS AND	DIRECTO	RS	11.	·			DITIONS/CHANGES TO OFFIC			-IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,S JOANNE VIVERO, 1627 BRICKELL AVE # 2706 MIAMI FL 33129		□ Delete	li)	1		[]{	<b>00002207</b> 3/05/03010730	959[ 20 **1	] Change <b>]</b> 50.00	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Celete	fii:						] Change	Addivir:

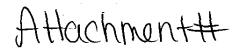
12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplieries that report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Brock 10 or Block 10 or Block

SIGNATURE

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/03

(305)211-0047





July 29, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Pe: Delplast, Inc. EIN# 27-0039479 Document# P02000125906

The above named taxpayer has not seen their payment in the amount of \$150.00 to your department for the 2003 Uniform Business Report clear their bank and are concerned that the check and form might have been lost by your department. The taxpayer mailed in the form along with the check on April 7, 2003 and more than three months have passed.

Enclosed please find a copy of the signed 2003 Uniform Business Report mailed in by the taxpayer along with a newly reissued check for \$150.00.

If you have any questions please do not hesitate to contact us.

Sincerely,

OCARIZ, GITLIN & ZOMERFELD, LLP

Raymond J. Zomerfeld, C.P.A.

For the firm

RJZ/an

Encl.

Tel 305.444.8288 Fax 305.444.8280

999 Ponce de Leon Blvd.

Coral Gables, FL 33134

Suite 1045

5415 Mariner Street Suite 215 Tampa, FL 33609

Tel 813.636.0609 Fax 813.636.9223

www.ogz-cpa.com

Members of:

American Institute of Certified Public Accountants

Florida Institute of Certified Public Accountants

National Association of Certified Valuation Analysts PLEASE ACKNOWLEDGE RECEIPT OF THIS LETTER BY RETURNING A COPY IN THE ENCLOSED SELF-ADDRESSED ENVELOPE.