2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117049

Entity Name: PLASTIC SYNERGY, CORP.

FILED Jun 05, 2008 Secretary of State

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

335 WEST 75TH PLACE 335 WEST 75TH PLACE HIALEAH, FL 33012 HIALEAH, FL 33014

Current Mailing Address: New Mailing Address:

335 WEST 75TH PLACE 335 WEST 75TH PLACE HIALEAH, FL 33012 HIALEAH, FL 33014

FEI Number: 20-2119576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

WILCZEWSKI, SONIA RIVERSIDE, NELLY THE BILTMORE HOTEL EXECUTIVE OFFICE 335 W. 75TH PLACE 1200 ANASTASIA AVE STE 400 HIALEAH, FL 33014 US CORAL GABLES, FL 33134 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: NELLY RIVERSIDE 06/05/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete FORRES, ALEJANDRA Name:

335 W 75 PL Address: City-St-Zip: HIALEAH, FL 33012

Title: () Delete RIVERSIDE, NELLY Name: 335 WEST 75TH PLACE Address: HIALEAH, FL 33012 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

TORRES, ALEJANDRA Name:

335 W 75 PL Address: City-St-Zip: HIALEAH, FL 33014

Title: VP,D (X) Change () Addition

Name: RIVERSIDE, NELLY Address: 335 WEST 75TH PLACE HIALEAH, FL 33014 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

VΡ SIGNATURE: NELLY RIVERSIDE 06/05/2008