2008 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-\$T-ZIP

FILED Apr 30, 2008 08:00 AM Secretary of State **DOCUMENT # P04000121141** SPACE COAST PLASTICS INC. Principal Place of Business Mailing Address 819 N COCOA BLVD 819 N COCOA BLVD COCOA, FL 32922 COCOA, FL 32922 No Chg-P 04282008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1538198 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5: Name and Address of Current Registered Agent HOLLABAUGH, BONITA DO NOT WRITE **4025 NATURE LANE** COCOA, FL 32926 IN THIS SPACE 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 famillar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE HOLLABAUGH, BONITA MALE STREET ADDRESS **4025 NATURE LANE** CITY-ST-ZIP COCOA, FL 32926 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.