## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # P04000133688** 03-29-2007 90021 043 \*\*\*150.00 1. Entity Name WILLIAMS PLASTICS INC Principal Place of Business Mailing Address 40044358 501-C-INDUSTRIAL STRRET 501-C INDUSTRIAL STRREL LAKE-WORTH, FL 33461 LAKE WORTH, FL 33461 3. Mailing Address 2. Principal Place of Business - No P.O. Box # SAME AS # 2 RICHNILL INT'L INC Suite, Apt. #, etc. 01082007 CR2E034 (12/06) Cho-P 9221 RIDGELAND DRIVE Applied For City & State 4 FFI Number City & State FLORIDA MIAMI. Not Applicable 20-1788631 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MICHAEL RAGOONATH & ASSOCIATES INC 200 KNUTH RD SUITE 218 BOYNTON BEACH, FL 33436 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 agen DATE (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ■ Addition TITLE ☐ Delete TITLE DAVID M. STAPLES STAPLES, DAVID M NAME NAME HODDI RIDGELAND DRIVE 501-C INDUSTRIAL ST STREET ADDRESS STREET ADDRESS LAKE WORTH, FL 33461 MIAMI FLORIDA . 33157 U.S. A CITY-ST-ZIP CITY-ST-ZIP Addition Delete TITLE TITLE MANNERSTEDT, ELIZABETH PAYNE, LEDNARD A NAME NAME 501-CJMDUSTRIAL ST STREET ADDRESS STREET ADDRESS 19231 RIDGELAND DRIVE LAKE WORTH, FL 33461 U.SA CITY-ST-ZIP CITY-ST-7IP MIAMI . FLORIDA . ☐ Change ☐ Addition T(T) F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITI F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP 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.

DAUD

SIGNATURE:

FILED

Mar 29, 2007 8:00 am