

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000150134

Entity Name: PLASTIC PARTS, INC.

FILED  
Feb 11, 2009  
Secretary of State

## Current Principal Place of Business:

1721 BLOUNT RD  
A  
POMPANO BEACH, FL 33069

## Current Mailing Address:

1721 BLOUNT RD  
A  
POMPANO BEACH, FL 33069

## New Principal Place of Business:

4100 NORTH POWERLINE ROAD  
SUITE Z-5  
POMPANO BEACH, FL 33073

## New Mailing Address:

4100 NORTH POWERLINE ROAD  
SUITE Z-5  
POMPANO BEACH, FL 33073

FEI Number: 33-1104616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OATES, THOMAS D ESQ.  
1500 EAST ATLANTIC BLVD., STE. B  
POMPANO BEACH, FL 33060 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: ALLEN, DANIEL  
Address: 1721 BLOUNT RD A  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPT ( ) Delete  
Name: PORES, TODD  
Address: 1721 BLOUNT RD A  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: PORES, TODD  
Address: 4100 NORTH POWERLINE ROAD SUITE Z-5  
City-St-Zip: POMPANO BEACH, FL 33073

Title: VPT (X) Change ( ) Addition  
Name: PORES, TODD  
Address: 4100 NORTH POWERLINE ROAD SUITE Z-5  
City-St-Zip: POMPANO BEACH, FL 33073

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.

SIGNATURE: TODD PORES

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date