## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000063881

Address:

City-St-Zip:

Entity Name: AMERICAN PAINT AND PLASTICS CORP

FILED Mar 26, 2009 Secretary of State

LINKY NAME. AWIERICAN FAINT AND FLASTICS CORF					
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
13050 NW OPA LOCK	43 AV KA, FL 33054				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
13050 NW OPA LOCK	43 AV KA, FL 33054				
FEI Number:	20-4816112	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	f New Registered Agent:	
			DICKSON, CARLOS 888 BRICKELL KEY DI MIAMI, FL 33131 U	_	
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: CARLOS DICKSON				03/26/2009	
	Electron	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BERACASA, AI	. KEY DRIVE #2801	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BLANCO, ALBI	. KEY DRIVE #2801	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BLANCO, WILL	. KEY DRIVE #2801	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DICKSON, CAR	. KEY DRIVE #2801	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	DIR ( BECERRIL, HU	) Delete JMBERTO	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ALFREDO BERACASA PRE 03/26/2009

888 BRICKELL KEY DRIVE #2801

MIAMI, FL 33131