FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **1998** 98 JUN 17 PH 1:58 **DOCUMENT # P39761** GENERAL PLASTICS, A DIVISION OF PMC, INC. Principal Place of Business Mailing Address 12243 BRANFORD ST. 12243 BRANFORD ST. SUN VALLEY CA 91352 SUN VALLEY CA 91352 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1992 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 95-3054442 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country Country Zip Zio 8. This corporation owes or has paid the current year Intangible X Yes Fersonal Property Tax due June 30. 25 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 Zip Code R4 City 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typical or printed more of registerist agent and line if apply table ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change Addition PCD DETETE TITLE 1 1 1 1 TUE KAMINS, PHILIP E. 1.2 NAMI NAME 500002564345---8 -06/18/98--01064--001 12243 BRANFORD STREET 1.3 STREET ADDRESS STREET ADDRESS SUN VALLEY CA 91352 1.4 CHY-ST-ZIP CITY-ST-ZIP VST DELETE 21 TITLE TITLE JOHNSON, LORI M. 2.2 NAME NAME 12243 BRANFORD STREET STREET ADDRESS 2.3 STREET ADDRESS **SUN VALLEY CA 91352** CITY-ST-ZIP 2 4 CHY-S1-7IP ___ Addition DELETE TITLE 3.1 TITLE JOHNSON, LORI M. NAME 3.2 NAMI **12243 BRANFORD STREET** STREET ADDRESS 3 3 STREET ADDRESS SUN VALLEY CA 91352 CITY-ST-ZIP 3.4 CITY - ST- ZIP **建物集命号**— Addition DCF0 DELETE 4.1 TITLE TITLE CHEONG, THIAN C 4. 2 NAME NAME 12243 BRANFORD STREET 4.3 STREET ADDRESS STREET ADDRESS **SUN VALLEY CA** CITY-ST-ZIP 4.4 CITY - ST-7IP Change ___ Addition DILLETE 5.1 TITLE TITLE 5 2 NAMI NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 City - \$1 - ZIP CITY+ST-ZIP Addition DELETE 613016 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this around report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under ooth, 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 12 or Block 13 if changed, or on an attachment with an address

16.698