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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

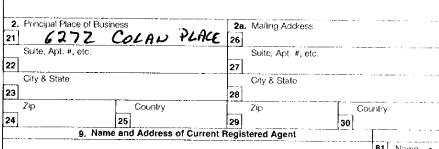
P93000084842 (2)

PAL PLASTICS II CORPORATION

Principal Place of Business 6272 COLAN PLACE

Mailing Address

6272 COLAN PLACE



FILED Mar 26 1996 8:00 am Secretary of State



US	FL 34240-9388	SARASOTA FL 34240- US	·9388			
		,		3. Date incorporated or Qualified 12/06/1993	3a. Date of Last Report 01/26/1995	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	72 COLAN PLACE			65-0454761	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Oity & State	9	Crty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip	Country	8. This corporation has liability for in	Added to Fees	
24	25	29	30			
	Name and Address of Current I	Registered Agent		10. Name and Address of New Ro		
PALERMO, ANTHONY H 6272 COLAN PLACE			82 Street Add	82 Street Address (P.Q. Box Number is Not Acceptable)		
	OTA FL 34240-9388		83	4 Crocker Lake	BLVD	
			84 City SAR	RASOTA	FI 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607,0502 at	nd 607.1508, Florida Statute	es, the above named coross	ration entroite tois alslowent for the e.m.	37232	
11. Pursuant to the provisions of Sections 607 9502 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 Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am						
SIGNATURE Until Like Species of period rame of operation of the interplace of the in						
12.	OFFICERS AND D	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TIFLE	P DALEDING ANTICONIC	☐ DELETE	1. 1 TITLE		Change Addition	
NAME	PALERMO, ANTHONY		1.2 NAME			
STREET ADDRESS	6 FLAMINGO CIR.		1.3 STREET ADDRESS			
CITY - ST-ZIP	ROCHESTER NY VP		1.4 CITY - \$1 - ZIF			
TITLE	l 21	DELETE	2 1 TITLE		Change Addition	
NAME	PALERMO, PAUL 1156 WHITLOCK RD.		2.2 NAME			
STREET ADDRESS	ROCHESTER NY		2.3 STREET ADDRESS		İ	
CITY-ST-ZIP	NOONESTER IN	E3 OLLTI	2.4 C(TY-ST-Z(f)			
NAME		☐ DELETE	3 1 TITLE		Change Addition	
STREET ADDRESS			3.2 NAME			
CHY-ST-ZIP			3.3 STREET ADDRESS			
TITLE		DELETE	34 City - St - ZiP 4 1 Title		Chenny Dally	
NAME		better	4 7 TIBLE 4 2 NAME		☐ Change ☐ Addition	
STREET ADDRESS			4.3 STHEET ADDRESS			
CITY-S1-ZIP			4.4 CITY - ST - ZIP		1	
TITLE		DELFIE	5 1 TITLE		Change Addition	
NAME		_	5.2 NAME		C onlings C Addition	
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5 4 C(1Y - S1 - Z(P			
TITLE		DELETE	6 1 TILLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CIDY+ ST- ZIP		ļ	
14. I do hereby	certify that the information supplied with	this filing is voluntarily furnis	shed and does not qualify fo	or the exemption stated in Section 119.0	7(3)(k) Florida Statutes I further	

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HUTHOW / PALERMO 2-12-96 (716) 426-2070