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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1. Corporation Name MARTIN PLASTICS INC.								
Principal Place of Business Mailing Address 870 E. GAY STREET PO BOX 1384					T JOOLER DE FEET AND LOUIS DAMES DE LE ROUIT BOUT BOUT BOUT DE LE CONTRACT DE LE CONTRACT DE LE CONTRACT DE L Traction de la contract de la c			
BARTOW FL 33830	BARTOW FL 33830				DO NOT WRITE IN THIS SPAC			
		4			3. Date incorporated or Qualifed 01/28/1994			
Principal Place of Business 21	2a. Mailing Address				4. FEI Number 59-3156381			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			
City & State	City & State				6. Election Campaign Financing Trust Fund Contribution \$ \$			
Zip Country	Zip 29	Country			8. This corporation owes the current year Intangible Personal Property Tax.			
9. Name and Address of Curr	ent Registered Agent	1			10. Name and Address of New Registered Agent			
MARTIN, JOHN D		81	1	Name				
480 HEATHER COURT			2	Street Addres	ess (P.O. Box Number is Not Acceptable)			
BARTOW FL 33830			3		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
And the course of the second	There is the state of the state	84 City			FL 85			
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli	te of Florida. Such change w	vas authorized by	y ti	named corporation	ation submits this statement for the purpose of chang s board of directors. I hereby accept the appointment			

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90051 021 ***150.00



☐ Yes

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees

□No

TITLE	_		84 City		· FI 8	5 Zip Co	ae
Signature, typed or printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating): DATE	11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statuter registered agent, or both, in the State of Florida. Such change was au	thorized by the corpor	orporation submits this statement for ation's board of directors. I hereby a	the purpose of char ccept the appointme	nging its re ent as regis	gistered stered
12.	SIGNATURE				DATE		
TITLE	40					IRECTOR	S IN 12
NAME			1	ADDITIONS/CHANGES TO	 		
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CITY-ST-ZIP 6.4 CITY-ST-ZIP			6.4 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 angular good or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an	14. I hereby	certify that the information supplied with this filing does not qualify for t	the exemption stated	n Section 119.07(3)(i), Florida Statut	es. I further certify t	hat the info	rmation

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am at 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 our an attachment with an address, with all other like empowered.