## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000018490

DOLYMED OFFINION INIO

FILED Apr 27, 2004 Secretary of State

Entity Nai	me: POLYMER	R SERVICES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ERVILLE DR LLE, IL 60446	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ERVILLE DR LLE, IL 60446	US			
FEI Number	: 65-0472223	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
STE 240	JAMES P LAND CENTER D, FL 32751 U				
	named entity s e of Florida.	ubmits this statement for the	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () KOHUT, RONAL 1265 NAPERVIL ROMEOVILLE, I	LE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DER HAGOPÍAN	CENTER PARKWAY, STE 240	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CHUPLIS, W. JO	CENTER PARKWAY, STE 240	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () ASHTON, JAME	Delete S P	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES P. ASHTON DIR 04/27/2004

2301 MAITLAND CENTER PARKWAY, STE 240

MAITLAND, FL 32751

Address:

City-St-Zip: