Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90199 015 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000018623

1. Corporation Name

STREET ADDRESS

SIGNATURE:

CITY-\$T-ZIP

JORDAN PLASTICS, INC.

Principal Place	e of Business	Ma	ailing Address				(
4925 SAN RAFAEL ST TAMPA FL 33629			4925 SAN RAFAEL TAMPA FL 33629								00405		
US		US							NOT WRI	TE IN THIS	SPACE		= 1=:
								ncorporated (or Qualifed				
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI N				A	pplied For	
21		26					59-3	2977 <u>68</u>			N	lot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifo	cate of Status	Desired			Additional Required	
22 City & Stat		27	City & State				6 Floati	on Campaign	Financing			May Be	
	le .	28	Oily di Olate					Fund Contrib	-			I to Fees	
23 ∫ Zip	Country	201	Zip	Cou	intry			corporation ov		ent vear Int			
24	25	29		30	•			nal Property			∐Yes	□No	
	9. Name and Address of Curre		tered Agent	1,4-1			10. Name	and Addres	s of New F	Registered	Agent		
	*				81	Name							
	ort, paul r				82	Stroot Ar	ddress (P.O. Bo	v Number is i	Not Accepta	able)	•		╣
7522	2 N. 40TH STREET				62	Officer Vi	duless (F.O. Du	X RUITIDET 13	Not riccopie				╛
TAM	IPA FL 33604				83								
			•			0:1-	-				85 Zip	Code	-
					84	City				FL	. 65 214	Code	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the obligations.	e of Florid ations of,	da. Such'change was a , Section 607.0505, Flo	uthorize orida Stat	d by ti utes.	he corpor	ration's board of	directors. I no	nent for the ereby accep	nt the appoi	changing it intment as r	s registered egistered	
	Signature, typed or printed name of registered ago		if applicable. (NOTE	: Registered	l Agent	signature req	quired when reinstating	1)		DATE			⊣ {
12.											ID DIDEAT	ODC IN 40	
		ND DIRE	CTORS	13.			ADDIT	IONS/CHANC	SES TO OF	FICERS A			<u>.</u>
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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 annual report or supplied that 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 trestee 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 of the corporation with an address, with all other like empowered.