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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000019347 (0)

1. Corporation Name

FANTASTIC PLASTICS INC.



Principal Place of Business

400 MAHOGANY CIRCLE
KEY LARGO FL 33037-4222

Mailing Address

400 MAHOGANY CIRCLE
KEY LARGO FL 33037-4222

3. Date Incorporated or Qualified

03/08/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 90800 OVERSEAS HWY

26 Suite, Apt. #, etc.

22 Box 2

27 Suite, Apt. #, etc.

23 TAVERNIER FL

28 City & State

24 33070 25 USA

29 City & State

26 33070 27 USA

30 City & State

28 33070 29 USA

31 City & State

29 33070 30 USA

32 City & State

30 33070 31 USA

33 City & State

9. Name and Address of Current Registered Agent

BLEDSON, JAMES R
400 MAHOGANY CIRCLE
KEY LARGO FL 33037-4222

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and date of filing

(NOTE: Registered Agent signature required when new filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME BLEDSON, PATRICIA A
STREET ADDRESS 400 MAHOGANY CIRCLE
CITY-ST-ZIP KEY LARGO FL 33037-4222

TITLE D ☐ DELETE

NAME BLEDSON, JAMES R
STREET ADDRESS 400 MAHOGANY CIRCLE
CITY-ST-ZIP KEY LARGO FL 33037-4222

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE S/T/D ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Bledson

18 FEB 96 305.852-4288

Date

Daytime Phone #

CR2E034 (12/95)