

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000037425 (2)

1. Corporation Name

PHOENIX TOOL & PLASTICS, INC.



Principal Place of Business

Mailing Address

250 POWER CT
SANFORD FL 32771

250 POWER CT
SANFORD FL 32771

3. Date Incorporated or Qualified

05/10/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1711 HANFAR Rd

26 Suite, Apt #, etc

22 Suite, Apt #, etc

27 Suite, Apt #, etc

23 City & State

23 SANFORD, FL

24 Zip

24 32773

25 Country

25 USA

26 Zip

26 32773

27 City & State

27 SAME

28 Zip

28 32773

29 Country

29 USA

30 Zip

30 32773

4. FEI Number

59-3313487

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACKAY, JAMES R
250 POWER CT
SANFORD FL 32771

81 Name

81 HORST RIESE
82 Street Address (P.O. Box Number is Not Acceptable)
82 6106 FEATHER LANE

83

84 City

84 SANFORD

FL

85 Zip Code

85 32771

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 of person named as registered agent and their appointment

(If title Registered Agent signature required when registering)

HORST RIESE

8/5/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MACKAY, JAMES R
STREET ADDRESS 250 POWER CT
CITY-ST-ZIP SANFORD FL 32771

TITLE D
NAME RIESE, HORST
STREET ADDRESS 6106 FEATHER LN
CITY-ST-ZIP SANFORD FL 32771

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11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 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, the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or both, in attachment with an address.

SIGNATURE:

Signature of person named as registered agent and their appointment

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/5/96

407-324-9616

CR2E034 (3/96)