FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P95000090303 (5)

1. Corporation Name
INNOVATIVE PLASTIC PRODUCTS, INC.

Principal Place of Business
3595-115 WEST 20 AVENUE, SUITE 107
HIALEAH FL 33012

Mailing Address
3595-115 WEST 20 AVENUE, SUITE 107
HIALEAH FL 33012

3. Date Incorporated or Qualified: 11/28/1995
3a. Date of Last Report:

BAY #1

2. Principal Place of Business
21 3601 N. DIXIE HWY
Suite, Apt. #, etc.
22 BOCA-RATON, FL 33431
City & State
23
Zip 24 | Country 25 U.S.

2a. Mailing Address
26 same as above
Suite, Apt. #, etc.
27
City & State
28
Zip 29 | Country 30

4. FEI Number: 65 0620244 — Applied For / Not Applicable
5. Certificate of Status Desired: ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ — $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
~~THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD~~
~~343 ALMERIA AVENUE~~
~~CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent
81 Name: Carlos J. Reyes, Esq. - Martero, Finizio, etal
82 Street Address (P.O. Box Number is Not Acceptable): 200 SE 9th Street
83 ~~157 S.E. 10th Ave.~~
84 City: Fort Lauderdale ~~Hialeah, Fl~~ FL
85 Zip Code: ~~33010~~ 33316

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: Carlos J. Reyes, Esq. — DATE: 6-10-96
Signature of Registered Agent (NOTE: Registered Agent is required to sign above)

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	ALVAREZ, JOHN	
STREET ADDRESS	3595-115 WEST 20 AVENUE, SUITE 107	
CITY-ST-ZIP	HIALEAH FL 33012	
TITLE	VD	☒ DELETE
NAME	ESCUDERO, ANA C	
STREET ADDRESS	3595-115 WEST 20 AVENUE, SUITE 107	
CITY-ST-ZIP	HIALEAH FL 33012	
TITLE	SD	☒ DELETE
NAME	ALVAREZ, DIANA C	
STREET ADDRESS	3595-115 WEST 20 AVENUE, SUITE 107	
CITY-ST-ZIP	HIALEAH FL 33012	
TITLE	TD	☒ DELETE
NAME	HINCAPIE, JOHN F	
STREET ADDRESS	3595-115 WEST 20 AVENUE, SUITE 107	
CITY-ST-ZIP	HIALEAH FL 33012	
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	PD	☐ Change ☐ Addition
1.2 NAME	Alvarez, John	
1.3 STREET ADDRESS	3595-115 W. 20th Ave Suite 107	
1.4 CITY-ST-ZIP		
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	Hincapie, John J. ss# 592-03-1194	
2.3 STREET ADDRESS	3595-115 W. 20th Ave. Suite 107	
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	no longer officer	
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	no longer officer	
4.4 CITY-ST-ZIP		
5.1 TITLE	900001873819	☐ Change ☐ Addition
5.2 NAME	-06/24/96--01058--006	
5.3 STREET ADDRESS	***225.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

225.00

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 in an attachment with an address.

SIGNATURE: President — 6-10-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)