## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000051726

Entity Name: KNOWLES PLASTICS, INC.

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2019 S.W. 20TH ST 2005 S.W. 20TH ST

FORT LAUDERDALE, FL 33316 US SUITE 242 FORT LAUDERDALE, FL 33316 US

**New Mailing Address: Current Mailing Address:** 

2019 S.W. 20TH ST 10301 N.W. 16TH CT

SUITE 242 CORAL SPRINGS, FL 33071 US

FORT LAUDERDALE, FL 33316 US

FEI Number: 65-0680641 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KNOWLES, JEFF KNOWLES, JEFF 2019 SW 20 ST #242 2005 SW 20 ST #242

CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/28/2009

> Electronic Signature of Registered Agent Date

> > Address:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete (X) Change ( ) Addition KNOWLES, JEFF KNOWLES, JEFF Name: Name: 2019 SW 20TH ST. SUITE 242 2005 SW 20TH ST

City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition

KNOWLES, LISA Name: Name: KNOWLES, LISA 2019 SW 20TH STREET SUITE 242 Address: 2005 SW 20TH STREET Address: FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33315 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: JEFFREY H. KNOWLES PTD 04/28/2009