

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90179 039 ***150.00

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1. Entity Name
THE PLASTIC TRADING COMPANY, INC.



Principal Place of Business
2000 AVENUE P
#11
RIVIERA BEACH, FL 33404 US

Mailing Address
2000 AVENUE P
#11
RIVIERA BEACH, FL 33404 US

34000100



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0676133

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent:

~~BEARD, SUSAN~~
~~2000 AVENUE P~~ 2000 AVE P
#11
RIVIERA BEACH, FL 33404

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BEARD, JOHN
STREET ADDRESS 14082 LEEWARD WAY
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE ST
NAME ~~BEARD, SUSAN~~ MERKUN SUSAN
STREET ADDRESS ~~14082 LEEWARD WAY~~ 776 SEAVIEW DRIVE
CITY-ST-ZIP ~~PALM BEACH GARDENS, FL 33410~~

TITLE
NAME JUNK BEACH IF FL 33409

STREET ADDRESS
CITY-ST-ZIP
* NAME IS CHANGED
DUE TO CHANGE
OF MARITAL
STATUS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Sec 4/22/04 501-549
6894