PG6000057843

| (Req | uestor's Name) | |
|---------------------------|------------------|-----------|
| (Add | ress) | |
| (Add | ress) | |
| (City | /State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nam | ne) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



800036988518

N5./24/04--01036--004 **35.00

FILED OL JUN 25 PM 2: 33

the off

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: THE PLASTIC TRADING COMPANY, INC. |
| (Name of corporation) |
| DOCUMENT NUMBER: P96000057843 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Susan Merklin |
| (Name of person) |
| The Plastic Trading Company, Inc. |
| (Name of firm/company) |
| 2000 Avenue P, #11 |
| (Address) |
| Riviera Beach, FL 33404 |
| (City/state and zip code) |
| For further information concerning this matter, please call: |
| John E. Beard at (56) 644364 (Name of person) (Area code & daytime telephone number) |
| (Name of person) (Area code & daytime telephone number) |
| Enclosed is a \$35.00 check made payable to the Department of State. |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassas FI 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassas FI 32314 |



May 28, 2004

SUSAN MERKLIN THE PLASTIC TRADING COMPANY, INC. 2000 AVENUE P, #11 RIVIERA BEACH, FL 33404

SUBJECT: THE PLASTIC TRADING COMPANY, INC.

Ref. Number: P96000057843

We have received your document for THE PLASTIC TRADING COMPANY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

TO FILE A RESIGNATION AS AN OFFICER OR DIRECTOR WITH THIS OFFICE, THE ENCLOSED FORM SHOULD BE RETURNED WITH A FILING FEE OF \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6882.

Letter Number: 204A00037451

Maryanne Dickey Document Specialist

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provision change is submitted for | ons of sections 607 a corporation org | .0502, 617.05 anized under | 502, 607. the laws | 1508, or 617.15 of the State of _ | 08, Flor | rida Statutes, thi. 1 da | s statement in o | _ | |
|--|---|--|--|---|--|--|---|----------------------|-------|
| to change its registered | office or registere | d agent, or bo | oth, in the | State of Florida | la. | | | | |
| 1. The name of the corp | poration: The | Plastic T | rading | Company, | Inc. | | | | |
| 2. The principal office | address: 2000 | Avenue P | <i>,</i> #11, | Riviera B | each, | FL 33404 | .,, .,, .,, .,, .,, .,, .,, .,, .,, .,, | | |
| 3. The mailing address | (if different): | 2810 | 5€ | Monre | ØK. | 52-, | - | | |
| | <u> </u> | STIA | RZ, | FCA. | - 5 | 34997 | · | | |
| 4. Date of incorporation | n/qualification: 7/ | 10/96 | T | ocument numb | er:} | 29600005784 | 3 | | |
| 5. The name and street Florida Department | | ent registered | agent an | d registered offi | ice on fi | le with the | _ | | |
| | Susa | n Merklin | ļ | · | · · · · · · · · · · · · · · · · · · · | | | | |
| | 2000 | Avenue P | , #11 | | | | | | |
| | Rivi | era Beach | ्राच | 3/10/ | | | | | |
| | | | 2 2 2 2 | <u> </u> | | | | | |
| 6. The name and street (if changed): | address of the new | registered ag | ent (if ch | anged) and /or i | registere | ed office | ?> r. | _ | |
| (2 3 | Tohn | E. Beard | | | | | 777 | ر ا | سنداد |
| | * | Maria | · | <u>C</u> _ | . | , | , ÉS | 3 MIT | |
| <u>~~</u> | 810 SE | P.O. Box or person | al mailbox i | VOT acceptable) | . | | SEI | 23 | |
| S | TUART | FLA. | 3 | 4997 | 7 | | | P | |
| The street address of i | ts registered officical. | e and the stre | et addres | ss of the busine | ss offic | e of its registere | d age Las | 2: 33 | ~_ |
| Such change was auth the board, or the corp | orized by resolutioration has been n | on duly adop | ted by its | s board of directic change. | ctors or | by an officer so | authorized | l by | |
| X Sugaranar | of an officer or director | le | . | Susan M | erklir (Primed o | n, Resigning | g Reside | nt A | gen |
| I hereby accept the ap I further agree to com duties, and I am famil being filed merely to been notified in writin | pointment as regi iply with the provi lar with and acce reflect a change in g of this change. | stered agent sions of all si of the obligat the registere | and agre latutes re tion of m ed office | ee to act in this elative to the pr y position as re address, I here | capacit oper an gistered by confi | y, id complete peri d agent. Or, if t irm that the corj | formance o his docume poration ha | f my ent is is | |
| 1) John | Bal | | | 5/19 | 9/04 | | | | - |
| If signing on behalf o | re of Registered Agent) | | | • | • | (Date) | | | |
| JOHN E. | • • • • • • • • • • • • • • • • • • • | | | | A | Ch /11) Es | • | | |
| | d or Printed Name) | | | | // | (Capacity) | | | |

* * * FILING FEE: \$35.00 * * *