## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # P97000014516

SUNCO PLASTICS, INC.



Mailing Address

8501 NW 90TH ST MEDLEY, FL 33166-2187 US

Principal Place of Business

8501 NW 90TH ST MEDLEY, FL 33166-2187 US

## **FILED** Apr 28, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04232008 No Chg-P

4. FEI Number 65-0729041

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, HAROLD 8501 NW 90TH STREET MIAMI, FL 33166-2187

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	d office or re	egistered agent, or bot	h, in the State of Flor	rida. I am familiar with, an	d accept
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, 2008 Fee will be \$550.00				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS		•, •		) *	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BAILEY, HAROLD 8501 NW 90TH ST MEDLEY, FL 331662187			·		)930042 -80093-014 158	. 75
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-S1-ZIP				DO	NOT W	RITE	
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TITLE NAME STREET ADDRESS CITY - S1 - ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:		en e	مسمد سدو جائد حاجد بهود.		•••
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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							