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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P97000055196

1. Corporation Name
SUPERIOR PLASTIC DESIGNERS, INC.

Principal Place of Business
 424 SOUTH MILITARY TRAIL
 WEST PALM BEACH FL 33415

Mailing Address
 424 SOUTH MILITARY TRAIL
 WEST PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/24/1997

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1566402

Applied For
 Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip Country

Zip Country

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOWRY, HOWARD
 8340 BLUE CYPRESS DR
 LAKEWORTH FL 33467

81 Name **RICHARD J. DE ROSE**

82 Street Address (P.O. Box Number is Not Acceptable)

83 **1481 COLD SPRINGS CT**

84 City **VG. of WELLINGTON**

FL

85 Zip Code **33414**

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 *Richard J. De Rose* **RJES**

DATE **2-8-99**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **PSD**
 STREET ADDRESS **DEROSE, RICHARD J**
 CITY-ST-ZIP **424 SOUTH MILITARY TRAIL**
WEST PALM BEACH FL 33415

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME **VTD**
 STREET ADDRESS **DEROSE, JANICE H**
 CITY-ST-ZIP **424 SOUTH MILITARY TRAIL**
WEST PALM BEACH FL 33415

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. 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 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 on an attachment with an address, with another like empowerment.

SIGNATURE: *Richard J. De Rose* **Richard J. De Rose**

DATE **2-8-99**

Daytime Phone # **561 6834023**

CR2E034 (1/198)