

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048001

Entity Name: PLASTECH DESIGNS, INC.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

895 N RONALD REAGAN BLVD  
LONGWOOD, FL 327503009 US

## New Principal Place of Business:

## Current Mailing Address:

895 N RONALD REAGAN BLVD  
LONGWOOD, FL 327503009 US

## New Mailing Address:

FEI Number: 76-0719845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RANDLE, JOHN  
228 SHADY OAKS CIRCLE  
LAKE MARY, FL 32746 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: COHEN, PETER  
Address: 895 N RONALD REAGAN BLVD  
City-St-Zip: LONGWOOD, FL 327503009 US

Title: VP ( ) Delete  
Name: RANDLE, JOHN  
Address: 228 SHADY OAKS CIRCLE  
City-St-Zip: LAKE MARY, FL 32746 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PETER COHEN

PRES

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date