2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000048485

1. Entity Name
KCS PLASTICS, INC.

Principal Place of Business	Mailing Address
6201 S.W. 183RD. WAY FT. LAUDERDALE, FL 33331	6201 S.W. 183RD. WAY FT. LAUDERDALE, FL 33331

03202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0841069
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BROUWER, BRUCE
6201 S.W. 183RD. WAY
FT. LAUDERDALE, FL 33331

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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 _____ DATE
Signature, typed or printed name of registered agent and title, if applicable. (FOR A REGISTERED AGENT signature required when changing)

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

U00000136725
04/28/04-80099-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BROUWER, BRUCE
STREET ADDRESS	6201 S.W. 183RD. WAY
CITY ST ZIP	FT. LAUDERDALE, FL 33331
TITLE	D
NAME	BROUWER, PATRICIA
STREET ADDRESS	6201 S.W. 183RD. WAY
CITY ST ZIP	FT. LAUDERDALE, FL 33331
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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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: Bruce Brouwer Owner 4/20/04 954-434-2714
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #