## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Block 12 or Block 13 if changed, or

**PROFIT** Mar 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S20232 DEBRON PLASTICS OF FLORIDA, INC. Principal Place of Business Mailing Address 3911 SW 47TH AVE 3911 SW 47TH AVE **SUITE 907 SUITE 907 DAVIE FL 33314** DAVIE FL 33314 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/21/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 47# (Drenoe JW 47th Dre 65-0260702 4151 4151 SW Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired シマッチの Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be DAVIS Added to Fees 23 28 Trust Fund Contribution Zip 3 33314 Country Country 8. This corporation owes or has paid the current year Intangible J.5 A. .S.A. 24 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RADIS, RICHARD ALAN 1215 EAST BROWARD BLVD. Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE 1.1 TITLE STERMER, MATTHEW, J NAME 1.2 NAME **552 TALAVERA ROAD** STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELET**E** TITLE 2.1 TITLE Change Addition STERMER, JOANNE, N 2.2 NAME **552 TALAVERA ROAD** STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change \_\_\_ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I hereby certify that the information sup-indicated on this annual report or sup-officer or director of the corporation of his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

a inual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an Ar or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

ppmen

2/22/02

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