FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 2:09

DOCUMENT # 583066 (6)

1. Corporation Name
PLUM ENTERPRISES, INC.

Principal Place of Business	Mailing Address
101 S.E. 6TH AVE. ~~THE PLUM BLDG., SUITE C~~ DELRAY BEACH FL 33483-5261	101 S.E. 6TH AVE. ~~THE PLUM BLDG., SUITE C~~ DELRAY BEACH FL 33483-5261

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/22/1978
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
21: 185 N.W. SPAINISH RIVER BLVD
Suite, Apt. #, etc. 22: SUITE 290
City & State 23: BOCA RATON
Zip 24: 33431-4230 Country 25: PALM BEACH

2a. Mailing Address
26: SAME AS 21
Suite, Apt. #, etc. 27:
City & State 28:
Zip 29: Country 30:

4. FEI Number: 59-1845153
Applied For ☐ Not Applicable ☒

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PLUM,JR., WILLIAM M.
~~101 S.E. 6TH AVE.~~
~~THE PLUM BLDG., SUITE C~~
~~DELRAY BEACH FL 33444~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): USE NEW ADDRESS
83
84 City: FL 85 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: WILLIAM M. PLUM JR. PRESIDENT William M. Plum Jr. 4/11/95
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PLUM,JR., WILLIAM M. 101 S.E. 6TH AVE. → NEW → DELRAY BEACH FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition PRESIDENT PLUM, JR WILLIAM M. 185 NW SPANISH RIVER BLVD BOCA RATON F 33431-4230
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PLUM, MICHAEL K. ~~101 S.E. 6TH AVE.~~ ~~DELRAY BEACH FL~~	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition VICE PRESIDENT NEW ADDRESS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: 2-20-95 407-295-0300
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
Michael K. Plum William M. Plum, PRES. 407-391-3877

Q276327 CP