

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

FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H49277** (7)

1. Corporation Name
PLANTATION BAY UTILITY CO.

Principal Place of Business

**100 PLANTATION BAY DRIVE
ORMOND BEACH FL 32174**

Mailing Address

**100 PLANTATION BAY DRIVE
ORMOND BEACH FL 32174**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1985

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

59-2511975

Applied For

Not Applicable

22

City & State

27

City & State

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

23

Zip

Country

28

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

24

25

29

30

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**HOSSEINI, MORI
2359 BEVILLE ROAD
DAYTONA BEACH FL 32119**

10. Name and Address of New Registered Agent

81 Name

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

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	LAZARE, FRANCOIS	
STREET ADDRESS	ROUTE DE CHENE #5	
CITY-ST-ZIP	1207 GENEVA SW	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	IRWIN, STEPHEN	
STREET ADDRESS	505 PARK AVE	
CITY-ST-ZIP	NEW YORK NY	

TITLE	D	<input type="checkbox"/> DELETE
NAME	PIGUET, PAUL	
STREET ADDRESS	2 RUE JARGONNANT	
CITY-ST-ZIP	1211 GENEVA 6 SW	

TITLE	P	<input type="checkbox"/> DELETE
NAME	HOSSEINI, MORI	
STREET ADDRESS	2359 BEVILLE ROAD	
CITY-ST-ZIP	DAYTONA BEACH FL	

TITLE	ST	<input type="checkbox"/> DELETE
NAME	TRINDER, JEAN	
STREET ADDRESS	2359 BEVILLE ROAD	
CITY-ST-ZIP	DAYTONA BEACH FL	

TITLE	VP	<input type="checkbox"/> DELETE
NAME	ROSS, DOUGLAS	
STREET ADDRESS	2359 BEVILLE ROAD	
CITY-ST-ZIP	DAYTONA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS ☐ Change ☐ Addition

14 CITY-ST-ZIP ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition

22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS ☐ Change ☐ Addition

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS ☐ Change ☐ Addition

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS ☐ Change ☐ Addition

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS ☐ Change ☐ Addition

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS ☐ Change ☐ Addition

64 CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

PLANTATION BAY UTILITY CO.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mori Hosseini, President

Date

4/29/98 904-788-0820

Daytime Phone # **0026002**

CR2E034 (10/97)