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

CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J34673

(0)

PLANTATION 100 GORP:

ENTERPRISES, INC.

Principal Place of Business N MARK SHANTZIS 8061 COLLINS AVE. #6F MIAMI BEACH FL \$3140

2. Principal Place of Business

Sulte, Apt. #, etc.

Mailing Address

% MARK SHANTZIS 6061 COLLINS AVE., #6F MIAMI BEACH FL 33140-2267

2a. Mailing Address

Suite, Apt. #, etc.

FILED Apr 24 1997 8:00am Secretary of State

<u> </u>	: 1	(E)	

3. Date Incorporated or Qualified

09/24/1986

59-2727365

4. FEI Number

3a. Date of Last Report

Applied For

\$8.75 Additional

Not Applicable

05/01/1996

22	οι. π, σιο.		5. Certificate of Status Desired Fee Required				
City & Stat	ө	City & State			Election Campaign Financin Trust Fund Contribution	g \$5.00 Ma , Added to F	
Ziρ	Country	Zip	Country	,	8. This corporation has liability	for intengible tax under s. 19	9.032,
24	25	29)	30		Florida Statutes	Yes No	
- Alda	9. Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of Nev	/ Registered Agent	
	INTZIS, MARK 1 COLLINS AVE., #6F		61	INAME			
	MI BEACH FL 33140		82	Street Addr	ess (P.O. Box Number is Not Acce	ptable)	
S 244; (MINA)	MI DEACH FL 33 (40		83				
21 4 5 5 1			30				
			84	City		FI 85 Zip Coo	e
44 Purcuant	to the provisions of Sections 607,0502	and 607 1508 Florida Statu	ites the above	a-named corn	oration submits this statement for t		noistared
office or r	registered agent, or both, in the State of the familiar with, and accept the obligation	of Florida. Such change was	authorized by	the corporat	ion's board of directors. I hereby a	ccept the appointment as reg	gistered
	iiii iainiiiar with, and accept the obliga	iions of, Section 607.0505, F	nonda Statules	S.			
SIGNATURE	Signature, typod or printed name of registered agen-	t and title it applicable. (NO	Olf: Registered And	ont signature requir	ed when reinstating)	DATE	
12.	OFFICERS AND		13.		AND THE PROPERTY OF THE PROPER	ESIGERO ALIR DIRECTORO II	N 12
TITLE	70	DELETE	1.1 YALE		P/D	☐ Change 🥻	Addition
NAME	SHANTZÍS; MARK		1.2 NAME	5	HANTZIS, MO	RA #15	
STREET ADDRESS	6061 COLUNS AVE., #8F		1.3 STHEET	ADDRESS (obl Collins	AVE, TOP	
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY - S	T-ZIP	LAMI BEACH	FLA. 33/40	>
TITLE	*	X) DELETÉ	2.1 TETLE	V	P/D	Change L	Addition
NAME	JORDAN, CILDA.		2.2 NAME	کا	HANTZIS, MARX	Company of the second	
STREET ADDRESS	945-POINDIANA TOLAND DR		2.3 STREET	ADDRESS 6	1061 COLLINS AL	E, 46F	
CITY-ST-ZIP	-N MIAMI-EBANG FL		2.4 CITY-5	ST-ZIP 1	MAMI BEACH	FLA. 33/40	
TITLE		[] DELETE	3.1 TITLE		PD HANTZIS, MO 1061 COLLINS 11AMI BEACH 1061 COLLINS AN 11AMI BEACH	☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			_
TITLÉ		L DELETE	4.1 TITLE	ļ		L Change	Addition
NAME			4. 2 NAME	}			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		- I printe	4.4 CITY-S	T-ZIP			1.100
TITLE		DELETE .	5.1 TITLE			∐ Change [Addition
NAME			5.2 NAME	LDDDCoc			
STREET ADDRESS	·		5.3 STREET				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	1- ZIP		Change	Addition
NAME		Fil bereit	62 NAME			in oliginge L	
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP		/	6.4 CITY-S				
	by certify that the information tunnlied	Willy this filling closes not and			Lin Section 119 07/31(i) Florida Sta	dutes. I further certify that the	
	by certify that the information upplied in Indicated on bits an artificial or like the following of the following	oplemental annual reports he received or trustee endivi on an attachmost with the	true and accu wered to exec y ess.	rate and that ute this repor	11 21.		
SIGNAT	URE: /////la///	I \ Dan 16	·	_	41/01//	305-861-	264