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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

THLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

J37988

(9)

INVESTMENTS BY PLANNERS, INC.

	MERITO DI LEMMENO, MO	•						
Principal Plac	e of Business	Mailing Address					O() BIBH OFAH BIBH	
2500 N. MILITARY TRAIL. SUITE 285 2500 N. MILITARY TRAIL. SI BOCA RATON FL 33431 BOCA RATON FL 33431-630								
							Date of Last R	eport
		2a. Mailing Address					1/24/1996	
						4. FEI Number	<del></del>	plied For
Suite, Apt	# ptc	26 Suite, Apt. #, etc.				59-2726455	\$8.75	t Applicable
22	н, ото.	27				5. Certificate of Status Desired	Fee Re	
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	May Ro
23		28				Trust Fund Contribution	Added t	
Zip	Country	Zip	Co	untry	,	8. This corporation has liability for intangil	ble tax under s	199.032,
24	25	29	30			Florida Statutes Yes	□ No	
	<ol><li>Name and Address of Curren</li></ol>	t Registered Agent		Ţ_	···	10. Name and Address of New Registers	d Agent	
SAC	BINOR, GARY	•		81	Name			
	o n. Military trail			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
SUITE 285								
BO	CA RATON FL 33431			83				
				84	City		. 85 Zip (	Code
				1	,	<u> </u>	FL   '   '	
office or agent Ta	to the provisions of Sections 607,030, registered agent, or both, in the State on familiar with, and accept the obligation Stgreatine speed or printed name or registered age					orporation submits this statement for the purpose ation's board of directors. I hereby accept the a purpose submits the second of directors and the second of directors.		registered
12.	OFFICERS AND		13.		on argument rou	ADDITIONS/CHANGES TO OFFICERS A		S IN 12
TITLE	PD	DELETE		TITLE		7.551110.1010111111320 75 017.10211071	Change	Addition
NAME	SAGINOR, GARY		1.2	NAME				
STREET ADDRESS	2500 N. MILITARY TRAIL #285	•	1.3 :	STREET	ADDRESS	·		
CITY - ST - ZIP	BOCA RATON FL		ľ		ST-ZIP			
TITLE	ŠĪ	DELETE		TITLE			☐ Change	Addition
NAME	SAGINOR, CLIFFORD		2.21	NAME	Ì			
STREET ADDRESS	2500 N. MILITARY TRAIL		23	STREET	ADDRESS			
CITY - ST - 2IP	BOCA RATON FL		2. 4	CITY-:	ST-ZIP			
TITLE	VP	DELETE	3.1	TITLE			Change	Addition
NAME	SAGINOR, LEON		3.21	NAME				
STREET ADDRESS	2500 N, MILITARY TRAIL #285	•	3.3	STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		3.4.	CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1	TITLE		7711	Change	Addition
NAME			4 2	NAME	ļ			
STREET ADDRESS			431	STREET	ADDRESS			
CITY-ST-ZIP			4.4	OITY-S	ST-ZIP			

6.4 CITY - ST - ZIP CITY: ST-ZIP ion supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 potention or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify al report or supp information indic. ted on thi I am an officer d appears in Block ont with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

Gary Saginor SIGNATUÁE

DELETE

DELETE

President TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-998-0909 1/8/97

**FILED** 

Jan 17 1997 8:00am

Secretary of State

Change

Change

Addition

Addition