

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90347 001 *3,600.00


66013787



01132005 Chg-P CR2E034 (10/03)

4. FEI Number **59-2983994** Applied For ☐ Not Applicable ☐

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

DOCUMENT # L29727		
1. Entity Name PLANMOR, INC.		

Principal Place of Business 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119 US	Mailing Address 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119 US
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2. Principal Place of Business 2379 Beville Road	3. Mailing Address 2379 Beville Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Daytona Beach, Florida	City & State Daytona Beach, Florida
Zip 32119	Country USA

6. Name and Address of Current Registered Agent HOSSEINI8KARGAR, MORTEZA 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2379 Beville Road City FL Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HOSSEINI-KARGAR, MORTEZA 2359 BEVILLE ROAD DAYTONA BEACH, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2379 Beville Road
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IRLAND, CHARLENE 2359 BEVILLE ROAD DAYTONA BCH, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2379 Beville Road
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS THORNTON-HILL, TERESA 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AVP Newkirk, Kimberly A. 2379 Beville Road Daytona Beach, FL 32119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Morteza Hosseini-Kargar **President** 4/21/05 **386-788-0820**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #