85 Zip Code

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

PROFIT CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L30623

ALL FLORIDA PLUG, INC.

| Principal Place of Business | | | Mailing Address | | | |
|--|---------------------------|-------------------|--|-----------|--|--|
| 121 S.E. 9 COURT POMPANO BEACH FL 33080 | | | 121 S.E. 9 COURT POMPANO BEACH FL 33060 | | | |
| 2. 21 | Principal Place of Busine | ess | 2a. Mailing | a Address | | |
| 22 | Suite, Apt. #, etc. | | Suite, Apt. #, etc | | | |
| 23 | City & State | | City & 28 | State | | |
| | Zip | Country | Zip | Country | | |
| 24 | [: | 25 | 29 | 30 | | |
| | 9. Name | and Address of Cu | rrent Registered A | gent | | |

BAXTER, EDWIN **121 SE 9TH CT** POMPANO BEACH FL 33060

| | 7 | • | r | _ | • | ı |
|------|---|-----|---|---|----|---|
| - }' | П | | ŀ | • | 1 | |
| 1 | ı | ••• | 1 | ٠ | ٠- | ١ |

99 MER 29 MM 9: 08

SECRETARIA CE STATE TALLARIZCOLE, FLORIDA

| 3. Date Incorporated or Qualifed 11/15/1989 | |
|--|-----------------------------------|
| 4. FEI Number | Applied For |
| 65-0160052 | Applied For Not Applical |
| 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 owes the current year | ar Intangible |
| Personal Property Tax | []Yes []No |
| 10. Name and Address of New Registe | ered Agent |

| | | , T |
|-----------|--|---|
| <u>5.</u> | 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpo | ose 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. Thereby accept the | appointment as registered |
| | agent. I am familiar with, and agreet the obligations of, Section 607.0505, Florida Statutes. | |

81 Name

82

83

84 City

| agent. I a | n familiar with, and accept the obligations of, Section 6 | 07.0505, Florida | Statutes | • • • | 00 | ا د |
|-------------------------------|--|------------------|----------------------------|---|----------------------------------|------------------------|
| SIGNATURE | Color BOUN | CHX (EX | <i>?</i> | | 1-5-99 | ' |
| 12. | Signature, typed or printed name of registered agent and little if applicable OFFICERS AND DIRECTORS | (NOTE Re | gistered Agent signal in r | upproductive reinstatings DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR | RS IN 12 |
| TITLE | | J DELETE | | 1.70 | [Change | (MAddition |
| | 101 |) DECETE | 110166 | RAKTER, EDWIN | [] entings | ٠,٠٠٠٠٠٠ |
| NAME . | BAXTER, EDWIN | | 12 NAME | 12158.957 | | |
| STREET ADDRESS | 121 SE 9 COURT | | 13 STREET ADDRESS | BAXTER, EDWIN 1215C.9CT. POMPANO BAFE 33060 | | |
| CITY-ST-ZIP | POMPANO BEACH FL 33060 | | 14 CITY-ST-ZIF | POMPHNO EST/CO | | - 20 20 20 20 20 20 20 |
| TITLE | P | DELETE | 21 TITLE | manay pamay pamay gamay gamay gamay gamay gamay gamay gamay gamay | []] Change | [] Addition |
| NAME | BAXTER, PHODA | ٠ ا | 2.2 NAME | 70000283 | UL KOLEDE A 11 LOGO OCTO LOGO | u=u** |
| STREET ADDRESS | 121 SE 9 COURT | | 23 STREET ADORESS | -84/06/99- | TUIUSS TU | H.H.: 15. 505 |
| CITY-ST-ZIP | POMPANO BEACH FL 33060 | | 2 4 CITY-ST-ZIP | ****150.0 | [[| |
| TITLE | |] DELETE | 31 TITLE | | [_] Change | [`] Addition |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 33 STREFT ADDRESS | | | |
| CITY-ST-ZIP | | | 34 CHY-ST-211 | | | |
| TITLE | | DEFELE | 4 1 TITLE | | [" Change | [Addition |
| NAME | | | 4 2 NAVE | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | 1 |
| TITLE | |] DELETE | 51 TITLE | | [Change | [] Addition] |
| NAME | | | 5.2 NAME | | | 1 |
| STREET ADDRESS | | | 53 STREET ADORESS | | | |
| City-st-zip | | | 54 CITY-ST-ZIP | | | . |
| MILE | |] DELETE | 6 1 TITLE | | [] Change | [] Addition |
| NAME | | | 62 NAVE | | | |
| ***************************** | | | 6.3 STREET ADDRESS | | | 1 |

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, with all other like empowered.

EDWIN BAXTER SIGNATURE: (