


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000114331 1. Entity Name PLUM PARK I, INC.	
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Principal Place of Business 141 NW 20TH STREET G-122 BOCA RATON, FL 33431	Mailing Address 141 NW 20TH STREET G-122 BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE



02152007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1060091	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MARGOLIS, DAVID R 141 NW 20TH STREET G-122 BOCA RATON, FL 33431
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**DO NOT WRITE
IN THIS SPACE**

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: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000679478 04/03/07-80039-020 150.00
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10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	MARGOLIS, DAVID R
STREET ADDRESS	141 NW 20TH STREET G-122
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	D
NAME	MARGOLIS, BELLE
STREET ADDRESS	141 NW 20TH STREET G-122
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	D
NAME	MARGOLIS, ALAN
STREET ADDRESS	141 NW 20TH STREET G-122
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *David Margolis* **3-22-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #