06251999-90013-027-\$150.00-\$150.00 FILED CURPURATION Katherine Harris Jun 25, 1999 8:00 am ANNUAL REPORT Secretary of State ... **Secretary of State** DIVISION OF CORPORATIONS 1999 DOCUMENT # **p93000025172**\ 06-25-1999 90013 027 \*\*\*150.00 1. Corporation Name 08-04-1999 90003 008 \*\*\*400.00 PLANTATION TRAVEL CENTER, INC. Mailing Address Principal Place of Business 6914 CYPRESS ROAD 6914 CYPRESS RD PLANTATION FL 33317 PLANTATION FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/31/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0407539 Not Applicab 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes the current year Intangible 30 ☐ Yes **Z**No 25 Personal Property Tax. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 NARGI. RONALD J 82 Street Address (P.O. Box Number is Not Acceptable) 8741 N. LAKE DASHA DRIVE PLANTATION FL 33324 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ture, typed or printed name of registered agent and title if applicati OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE Change TITLE 1.1 Title NARGI, RONALD J NAME 1.2 NAME 8741 N. LAKE DASHA DR. STREET ADDRES 1.3 STREET ADORESS PLANTATION FL 33324 CITY-87-ZIP 1.4 CITY- ST-29P DELETE Change Addit 2.1 TITLE TILE NARGI, ELLEN V 2.2 NAME NAME 8741 N. LAKE DASHA DR. STREET ADDRESS 2.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE. 31 TriLE Change ☐ Addit TILE 3.2 NAME MARKE STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-23P CITY-ST-ZIP DELETE ☐ Change Addit 4.3 TILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addit TILE ☐ DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addit ☐ Change TITLE □ DELETE

14. 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 instee 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 so an attachment with an appears, with all other like empowered.

62 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

30 1/2 1999 Date () CGSY)573-Deytuma Phone B