PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047923

1. Corporation Name

PLEN & MICHIE, INC.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90021 012 ***150.00



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Principal Place	e of Business	Mailing Addre	ess			-						
1100 N. FLORIDA AVE 1100 N. FLORIDA AVE												
TAMPA FL 33602 TAMPA FL 33602						1	DO NOT WRITE IN THIS					
						<u> </u>				THIS SPA	ICE	
								orporated or Qual	liteo			
							07/02/			•	1 (45)	plied For
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Suite, Apt.	#, etc.	Suite, Apt	. #, etc.			5.	Certifcate	e of Status Desire	ed 🗆	Þ	O.73 A Fee Re	additional
22		27										
City & State		City & State						Campaign Financ	cing _	,	55.00	
23		28				+-		nd Contribution			Added to	o rees
Zip	Country	Zip		Country				oration owes the	current ye	ear Intangit		□No
24	25	29	[30]					Property Tax.	la			<u> </u>
	9. Name and Address of Current	Registered Age	<u>nt</u>	-			Name a	nd Address of N	ew Regis	tered Agei	11	
NIO.	JIE POIČTODLIED A			81	Name							Į
	HIE, KRISTOPHER A		8:			Street Address (P.O. Box Number is Not Acceptable)						
	N FLORIDA AVE									·····		
I IAMI	PA FL 33614			83								{
	1			84	City					8	5 Zip C	Code
										FL		
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, F	lorida Statutes, th	he above	e-named o	corporation	submits	this statement fo	r the purpo	ose of char appointme	nging its nt as red	registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	or Florida. Such critions of Section 60)7.0505, Florida	rizeu by Statutes	пе согра	MALION S DO	aru or un	ectors. Thereby a	accept and	арропшис	11(62 105	
SIGNATURE												
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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 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 addless, with all other like empowered.

SIGNATURE: