## 4-9-97 B.4280 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
 CORPORATION
 ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000047234 (7)

## PLEFEN INCORPORATED

Pri	ncipa	Pia	ce	of E	lusine	SS
208	ARAN	DA	ST	NE		
CT.	PETER	SRI	ID:	FI	3370	1

Mailing Address

208 ARANDA ST NE

## FILED Apr 09 1997 8:00am Secretary of State



ST PETERSBUI		ST PETERSBURG FL	33704-3708						
				3. Date Incorporated or Qualified 06/20/1994		3a. Date of Last Report 03/13/1996			
2. Principal F	lace of Business	2a. Mailing Address				4. FEI Number	<u> </u>		Applied For
21 Suite, Apt. #, etc. 22 City & State 23		26				59-3254302			Not Applicable
		Suite, Apt. #, etc. 27 City & State 28			Election Campaign Financing     S. Election Campaign Financing     S. O M.      S. Election Campaign Financing			\$8.75 Additional Fee Regulred	
								00 May Be led to Fees	
Z <sub>I</sub> p	Country 25	Zip <b>29</b> ]	30 Cou	intry	<del></del>	8. This corporation has liability for Florida Statutes			
<u></u>	9. Name and Address of Currer					10. Name and Address of New Re			
LAN	TOS, EDWARD J			81	Name				
	7 62ND AVE S			82	Street Arte	dress (P.O. Box Number is Not Accepta	hlal		***************************************
	PETERSBURG FL 33712				Sileer Auc	aress (r. c. box reminder is red Accepta			
				В3					
				84	Oite			ToeT -	Zip Code
				04	City		FL	85 2	TIP Code
agent. Ca SIGNATURE	Special typic or pinted hand of registined ag					ation's board of directors. I hereby acce	DATE.	<del></del>	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIREC	
TillE	STD	☐ DELET	E 117	TLE				Chan	ige Additio
NAME	MAINENTI, FRANK		1.2 N	AME	ľ		i		
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	I shy cortify that the information supplies	ed with this filing does not				ed in Section 119 07(3)(i). Florida Statut	e I furthe	r certify I	that the

4. To bereby 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Mainde

#31-0685 Daytime Phone #