2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000019691

1. Entity Name
PLANTATION TOWNE SQUARE, INC.

Principal Place of Business	Mailing Address
1655 DREXEL AVE SUITE 208 MIAMI BEACH, FL 33139	1655 DREXEL AVE SUITE 208 MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

03222005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0565666
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RAPPORT, MORRIS
1655 DREXEL AVE SUITE 208
MIAMI BEACH, FL 33139

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RAPPORT, MORRIS
STREET ADDRESS	1655 DREXEL AVE SUITE 208
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	T
NAME	RAPPORT, SUSY
STREET ADDRESS	1655 DREXEL AVE SUITE 208
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	VSD
NAME	ROSENBERG, JEFFREY
STREET ADDRESS	1655 DREXEL AVE SUITE 208
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	D
NAME	RAPPORT, ROBERT
STREET ADDRESS	1655 DREXEL AVE STE 208
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	D
NAME	LILLIAN, ROSENBERG
STREET ADDRESS	1655 DREXTEL AVE STE 208
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/05-80088-015 158.75

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12. 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 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: Morris Rapport Morris Rapport 4/26/05 305-672-7735
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #