


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90095 031 ***150.00

| | |
|---|---|
| DOCUMENT # P95000034704 | |
| 1. Entity Name PLAVE MANTEN CONSULTING GROUP, INC. | |
|  | |
| Principal Place of Business 18851 NE 29TH AVE SUITE 406 AVENTURA, FL 33180 US | Mailing Address 18851 NE 29TH AVE SUITE 406 AVENTURA, FL 33180 US |

50033670



03312005 No Chg-P CR2E034 (10/03)

| | |
|---|--|
| 4. FEI Number 65-0575760 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

| | |
|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent MANTEN, JEFFREY M 18851 NE 29TH AVE SUITE 406 AVENTURA, FL 33180 | 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, 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 NAME STREET ADDRESS CITY-ST-ZIP | PD PLAVE, LAWRENCE S 18851 NE 29TH AVE, STE. 406 AVENTURA, FL 33180 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD MANTEN, JEFFREY M 18851 NE 29TH AVE, STE. 406 AVENTURA, FL 33180 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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**DO NOT WRITE
IN THIS SPACE**

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:  **JEFFREY M MANTEN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/05
Date

305-937-0096
Daytime Phone #