

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90120 036 ***150.00

DOCUMENT # P95000049948

1. Corporation Name

PLATT STREET PROPERTY, INC.

Principal Place of Business

2004 DURHAM STREET
TAMPA FL 33605

Mailing Address

2004 DURHAM STREET
TAMPA FL 33605



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1995

4. FEI Number

59-3328873

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

30

PO Box 75393

TAMPA FL

33675

US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, RANDELL
315 HYDE PARK AVENUE
TAMPA FL 33605

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME VENTO, ANTHONY A
STREET ADDRESS 7815 N 53RD ST
CITY-ST-ZIP TAMPA FL 33617

TITLE D ☐ DELETE
NAME CAPITANO, ANTOINETTE
STREET ADDRESS 11416 LENABOR DRIVE
CITY-ST-ZIP TEMPLE TERRACE FL 33617

TITLE D ☐ DELETE
NAME HELLNER, CATHERINE V
STREET ADDRESS 1555 DELANEY DRIVE APT. 1603
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE D ☐ DELETE
NAME VENTO, SAMUEL P
STREET ADDRESS 3915 WILLOWOOD DRIVE
CITY-ST-ZIP MARTINEZ GA 30907

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS Linarbor Place
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 2040 Bradshire Dr
3.4 CITY-ST-ZIP Mobile AL 36695

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)