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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000055996 (9)

FILED May 01 1997 8:00am Secretary of State

PLAZA PROPERTY MANAGEMENT, INC. Principal Place of Business Mailing Address 1499 SW 30TH AVENUE STE 16 BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426-9010																
											3. Date Incorporated or Qualified 07/17/1995	3a. Da 05/0	te of L)1/19		port	
2. Principal Place of Business					2a. Mailing Address						4. FEI Number			Ap	plied For	
21					26						65-0604213				t Applicable	4
22	Suite, Apt. #, etc				Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 Additional Fee Required				
23	City & State				City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees					
-	Zip Country				Zip Cour			untry			This corporation has liability for intangible tax under					-
24) [']	25 29			30				Florida Statutes	Yes [No	JOI 0.	105.002,	1		
		g, Name	and Address	of Current F	Regis	tered Agent					10. Name and Address of New Re	gistered A	gent]
MACKEY, DAVID E III									Nam	18						1
1499 SW 30TH AVENUE STE 16 BOYNTON BEACH FL 33426								82 Street Addr			ss (P.O. Box Number is Not Acceptab	ole)				1
	501	illion oc	NOTT E OUT					83		·						1
								84	City			FL	85	Zip C	Code	1
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.																
L		Signature, lyper	d or printed name of						int signa	ure required	d when rainstating)	DATE				ے ا
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14	I do hereb informatio	by certify the	at the informati	on supplied v	vith th	nis filing does not quali	fy for the	exe	mption	stated	In Section 119.07(3)(i), Florida Statute	s. I further	certify if med	that	the derioath: tha	,

d. I do 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 an indicate 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 DIRECTOR

Daytime Phone #

0309682