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 # P95000077709 (0)

I am an officer or director of the corporation or the receive appears in Block 12 or Block 13 if changed, or on an attack.

SIGNATURE:

PLUGGE ASSOCIATES, INC.

Principal Place of Business 11390 TWELVE OAKS WAY #619 NORTH PALM BEACH FL 33408

Mailing Address

11390 TWELVE OAKS WAY #619 NORTH PALM BEACH FL 33408-3273

FILED Apr 18 1997 8:00am Secretary of State



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					Date Incorporated or Qualified 10/05/1995		2/1996	
	ace of Business	2a. Mailing Address	Hwy 1	4. 1	FEI Number			plied For
1 /000			not i		NOT APPLICABLE			t Applicable
Suite, Apt : 2	777	Suite, Apt #, etc.		5. (Certificate of Status Desired		\$8.75 A	
City & State	ITER FL	City & State			Election Campaign Financing Frust Fund Contribution		\$5.00 Added t	
7 ^{Zp} 334	477 25 PalmBeach	A 29 33477	Country 30 PALM BE	ACH 8.	This corporation has liability for Florida Statutes	r intangible ta		199.032,
	9. Name and Address of Currer	nt Registered Agent			Name and Address of New R	egistered Ag	jent	
	IN, JAMES H		81 Name					
701 U.S. ONE #402			82 Street Address (P.O. Box Number is Not Acceptable)					
NOF	RTH PALM BEACH FL 33408				•			
			83					
	2		B4 City			FL	85 Zip (Code
11 Purcusant	to the provisions of Section 677,050	12 and 607 1508 Florida Statute	s the above-named	cornoration	submits this statement for the		hanging it	registered
office or n	to the provisions of Section, 607,050 egistored agent, of both in the State m familiar with, and assept the policy	of Florida. Such change was a	uthorized by the cor	poration's bo	oard of directors. I hereby acce	ept the appoi	ntment as	registered
agent Lai	m familiar with, and accept the onlig	ations of, Section 607.0505, Flo	rida Statutes.		14/	100		
SIGNATURE	Stgrature Typest or printed name of togist ten age	on and tile if applicable (NOTE	Registered Agent signatur	a required when r	einstation)	47/		
12.		D DIRECTORS	13.		ODITIONS/CHANGES TO OFFI	ICERS AND D	DIRECTOR	S IN 12
····								
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i	•	☐ DELETE				D		L_J Addition
NAME	PLUGGE, JAMES R		1.2 NAME	1000	ALIS HIGHWA		_ •	
NAME Street address	PLUGGE, JAMES R 11390 TWELVE OAKS WAY #	F619	1.2 NAME 1.3 STREET ADDRESS	1000	N US HIGHWA		_ •	
NAME Street address City-St-Zip	PLUGGE, JAMES R	F619	1.2 NAME	1000	N US HIGHWA TER, FL 3347		_ •	72
NAME Street address City-St-Zip Title	PLUGGE, JAMES R 11390 TWELVE OAKS WAY #	F619 108	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	1000	N US HIGHWA TER, FL 3347		#7	72
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