PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600025298

PLUMMER INVESTMENTS, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

3516 DURANGO STREET CORAL GABLES FL 33134 3516 DURANGO STREET CORAL GABLES FL 33134

2a. Mailing Address

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90126 050 ***150.00



Applied For

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/20/1996 4. FEI Number

21		26		65-0668747	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25	29 30	·L	Personal Property Tax.	Yes KNo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name					
CORPORATION SERVICE COMPANY KATHLETUR LUMMER					
1201	HAYS STREET	17112	92 Stroot Ac	idress (P.O. Box Number is Not Acceptable)	
TAN	AHASSEE FL 32301-2525	3516 Durantios Terra Galiles F	≥T 03		-
	0 11 12 12 12 12 12 12 12 12 12 12 12 12	JORAN Galiles F	price		
<i>V</i>	, ,	33134	84 City		85 Zip Code
Ad Diversion	45 4 - Inland of Continue CO7 0500	- ·	Abo about named se	maration authority this statement for the number	o of shooping its societored
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 a	mus	gistered Agent signature requ	irred when reinstating) DAT	2-17-99
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	D	DELETE	1.1 T/TLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME	PLUMMER, DAVID		1.2 NAME		-
STREET ADDRESS	3516 DURANGO STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33134		1.4 CITY-ST-ZIP		ĺ
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PLUMMER, KATHLEEN		2.2 NAME		
STREET ADDRESS	3516 DURANGO STREET		2.3 STREET ADDRESS		
CITY-\$T-ZIP	CORAL GABLES FL 33134		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	•		3.4. CITY-ST-ZIP		
TTI.E		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS		•	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		İ
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS	,	
CITY-ST-ZIP.			6.4 CITY-ST-ZIP		
14 I horoby o	with the the information of the print	this filing dans not qualify for the	vometies stated in	Section 110 07/3\(ii) Florida Statutes furthe	- portify that the information

I melecy ceruly that the information, supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(t). 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR