## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 15, 2004 08:00 AM Secretary of State

ANNUAL REPORT				
DOCUMENT # P960  1. Entity Name PLUMMER INVESTMENTS,				
Principal Place of Business	Mailing Address			

## DO NOT WRITE IN THIS SPACE

3516 DURANGO STREET

CORAL GABLES, FL 33134

03032004 No Chg-P CR2E034 (10/03)

	 <u> </u>
4. FEI Number	Applied For
_65-0668747_	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

1446-0367

6. Name and Address of Current Registered Agent

PLUMMER, KATHLEEN R 3516 DURANGO ST CORAL GABLES, FL 33134

3516 DURANGO STREET CORAL GABLES, FL 33134

## DO NOT WRITE IN THIS SPACE

				The Transport of the Control of the	Exp. Section 1		
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.							
(18 conganons on egistered agent.							
SIGNATURE							
	Signature, typed or printed name of registered agent and title	if applicable (NOTE Registered	Agent signature	required when reinstating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Electron Campaign Finant     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLUMMER, DAVID 3516 DURANGO STREET CORAL GABLES, FL 33134				U00000089377 03/15/04-80089-017 150.00		
TITLE NAME STREET ADDRESS CITY-SY-ZIP	D PLUMMER, KATHLEEN 3516 DURANGO STREET CORAL GABLES, FL 33134	177					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filling 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 appowered.							