2006 FOR PROFIT CORPORATION ANNUAL REPORT



FILED

Mar 14, 2006 8:00 am Secretary of State

DOCUMENT # P96000032246 1. Entity Name PLOTNICK ENTERPRISES, INC.					03-14-2006 90032 020 ***150.00			
Principal Place of Business 17711 S.W. 59 COURT SOUTHWEST RANCHES, FL 33331 US Mailing Address 17711 S.W. 59 COURT SOUTHWEST RANCHES, FL 33331 US Mailing Address 17711 S.W. 59 COURT SOUTHWEST RANCHES, FL				31 US	2	31081	s e rion illin sigin 11811 2 5812 8	III 3 - 11 - 12 - 1
2. Principal P	ace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03022006	Chg-P	CR2E034 (11/05)		
City & State		City & State		4. FEI Number 65-0662	004	<u> </u>	oplied For ot Applicable	
Zip	Country	Zîp	Count	ry		f Status Desired	See Require	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New R	egistered Agent	
GREEN, MITCHELL F 4000 HOLLYWOOD BLVD.				Name Street Address (P.O. Box Number is Not Acceptable)				
SUITE 485 SOUTH HOLLYWOOD, FL 33021			Ì					
चें इ				City	FL Zip Code			
the obligation of the obligati	named entity submits this statement from of registered agent. Signature, typed or printed name of registered agent.			d office or registe		, in the State of Flo	rida. I am familiar with	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finer Trust Fund Contribution.					5.00 May Be ded to Fees		DATE	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	73						☐ Change	Addition
TITLE NAME STREET ADDRESS : CITY-SI-ZIP	.:	☐ Delete					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		□ Delete					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition
40 16	and the second of the second o							

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered.