

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2008 8:00 am**  
**Secretary of State**

01-09-2008 90013 018 \*\*\*150.00

**DOCUMENT # P97000039050**

1. Entity Name

PLOTTY'S AUTO SALES, INC.

33334



2816 N Dixie Hwy Wilton Manors

Principal Place of Business

2808 N DIXIE HWY  
WILTON MANORS, FL 33334

Mailing Address

2808 N DIXIE HWY  
WILTON MANORS, FL 33334



01032008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0749370

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

2816  
PLOTNICK, LAURA  
2808 N DIXIE HWY  
WILTON MANORS, FL 33334

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

LAURA Plotnick president

(NOTE: Registered Agent signature required when resigning)

11/1/08

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE V  
NAME PLOTNICK, HOWARD A  
STREET ADDRESS 1821 NW 33 ST  
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE P  
NAME PLOTNICK, LAURA  
STREET ADDRESS 1821 NW 33ST  
CITY-ST-ZIP FT LAUDERDALE, FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/08

Date

Daytime Phone #

954563777