## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000047957 (0)

A SENSIBLE SOLUTION-DME, INC.

Principal	Place	of	<b>B</b> usiness
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## **FILED** May 06 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing A	ddress			a campateria tater entre matter anter anter anter anter inter 1919: Helt inter	
17861-D LAKE CARLTON DR.			17861-D LAKE CARLTON DR.				
LUTZ FL 3354	19	LUTZ FL	33549			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						05/29/1997	l
2. Principal P	lace of Business	2a. Mailin	g Address		•••	4. FEI Number Applied F	<u>-,,  </u>
21		26				59-345 (004 Not Appli	-
Suite, Apt.	#, etc.		Apt. #, etc.			\$8.75 Addition	-
22		27				5. Certificate of Status Desired Fee Required	
City & State	9	City &	State			6. Election Campaign Financing \$5.00 May B	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Zip Country		•	8. This corporation owes or has paid the current year Intampible	,
24	25	29		30		Personal Property Tax due June 30. 🔲 Yes 🔽 No	
	9. Name and Address of Curre	nt Registered A	Agent			10. Name and Address of New Registered Agent	
	atteis, gary s			81	Name		
	1614D LAKE CARLTON DR.			82	Street Add	ddress (P.O. Box Number is Not Acceptable)	
ԼՄ	TZ FL 33549					,	
				83			
				84	City	<b>■. 85</b> Zip Code	
					•		ĺ
11. Pursuant i	the provisions of Sections 607.050	02 and 607.1508	8, Florida <b>Sta</b> tut	ies, the above	-named co	orporation submits this statement for the purpose of changing its regist	ered
agent. I a	n <b>fam</b> iliar with, and accept the oblic	ations of, Sectic	n change was on 607 0505, FI	aumorizeo by orida Statules	rtne corpora 3.	realion's board of directors. I hereby accept the appointment as registe	red
SIGNATURE							
Old Williams	Signature, typed or printed name of registered ag	ectand the dappleal	tile (NO?	E Registered Age	nt signature requ	quired when reinstating) DATE	
12.	<del></del>	D DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
TITLE	D		☐ DELETE	1.1 TOTLE	P	Change Ac	ddition
NAME	<b>PLATTEIS, GARY S</b>			1.2 NAME	"	Plattels, Gary S.	
STREET ADDRESS	17861-D LAKE CARLTON DR	•		1.3 STREET	ADDRESS	17861-D Lake Cartum Dr	Ī
CITY-ST-ZIP	<u>LUTZ FL 33549</u>			1.4 CITY - S	1 - ZIP	Lute, Pl 33549	
TITLE			LJ DELETE	2.1 TITLE	<b>■</b>	☐ Change ☐ AC	Sdition
NAME				2.2 NAME	₽	Matteis Jacob D.	
STREET ADDRESS				2.3 STREET	ADDRESS (	17861-0 Lake Carlton Dr	
CITY-ST-ZIP				2. 4 CITY - S	91-18	Lutz. FL 33549	
TITLE			DELETE	3.1 TITLE	7	☐ Change ☐ 🗷	Idition
NAME				3.2 NAME	R	Plettels, Leonard It	
STREET ADDRESS				3.3 STREET	ADDRESS 5	806 Grand Harbour Cir.	
CITY-ST-ZIP			-	3.4. CITY - S	T-ZIP	Sounton Bch. FL 33437	
TITLE			DELETE	4.1 THTLE	3	S ☐ Change ☐ AO	dition
NAME				4. 2 NAME	P	Platteis, Dennie	
STREET ADDRESS				4.3 STREFT	ADDRESS 5	1806 Grand Harbour Circle	
CITY-ST-ZIP				4.4 CITY-S	r-zie	benton Reh. FC 33437	
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Ad	dition
NAME				5.2 NAME		•	
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY - ST			
TITLE			DELFTE	6.1 TITLE		Change Ad	Idition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		
CITY-ST-ZIP				6.4 CITY-ST			
on I havebure	and the state of t	TALL ALC: A COLUMN TO THE	. 100	0.4 UII1-S	-ZIF	. 0	

Thereby certify that the information supplied with this filing does indicated on this annual report of supplemental armught report is officer or director of the corporation or the receiver of hustice in Block 12 or Block 13 or changed, or on an attachment with an account of the corporation of the receiver of the state of the supplementation o The exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information urale and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in