SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000093732

FUTURE PLANNERS FINANCIAL SERVICES, INC.

FILED Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90001 003 ***150.00

4101 CORAL TE COCONUT CREI	e of Business REE CIRCLE (#213) EK FL 33073	Mailing Addres 4101 CORAL TRI COCONUT CREE	EE CIRCLE.	1213		;	Date Incorporated or Qualifie 11/03/1998 Fel Number	RITE IN THIS	
21	Att to	26					65-0876587	• 	Not Applicable
Sener Apt.	218	Suite, Apt.	#, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & Stat	te // , , a	City & State	e				6. Election Campaign Financing	<u> </u>	\$5.00 May Be
23	Scountry Scountry	Zip		Country			Trust Fund Contribution		Added to Fees
Zip	75 Country	29	3(¬ ´			 This corporation owes the cur Intangible Personal Property. 	rrent year	Yes No
	9. Name and Address of Curre			<u> </u>			10. Name and Address of New	Registered A	
				81	Name	•			
	WARTZ, HOWARD L			82	Strop	Addrag	ss (P.O. Box Number is Not Accep	laldet	
	i corporate blvd., n.w., s.4 A raton fl 33431	1 14							
BOC.	A PATON FE 30401			83					
				84	City			FL	85 Zip Code
Office or	t to the provisions of sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the obli	te of Florida. Such cha	ande was auti	horized by	the cor	corpora poration	tion submits this statement for the p n's board of directors. I hereby acco	purpose of cha ept the appoin	tment as registered
agent. I a		igations of, section 60	7.0505, Florid	ia Statutes	•		1000		
SIGNATURE	Stgnature, typed or printed name of registered ag	gations of, section 60	7.0505, Florid	: Registered Ap	•		ed when reinstating)	DATE	DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered ag	gations of, section 60 gent and title if applicable. AND DIRECTORS	7.0505, Florid	: Registered Ap	•		1000	DATE	
SIGNATURE 12.	Signature, typed or printed name of registered ap OFFICERS A	gations of, section 60 gent and title if applicable. AND DIRECTORS	7.0505, Florid	: Registered Ap	•		ed when reinstating)	DATE	D DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered as OFFICERS A	gations of, section 60 gent and title if applicable. NND DIRECTORS	7.0505, Florid	: Registered Ap	gent signs	ture require	ed when reinstating)	DATE	
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A D PREISS, SHELDON C 4101 CORAL TREE CIRCLE,	gations of, section 60 gent and title if applicable. NND DIRECTORS	7.0505, Florid	: Registered At 13. 1.1 TITLE 1.2 NAME 1.3 STREET.	gent signs	ture require	ed when reinstating)	DATE	
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered as OFFICERS A	gations of, section 60 gent and title if applicable. ND DIRECTORS [] ((NOTE	:: Registered Ag 13. 1.1 TITLE 1.2 NAME	gent signs	ture require	ed when reinstating)	DATE	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A D PREISS, SHELDON C 4101 CORAL TREE CIRCLE, # COCONUT CREEK FL 33073	gations of, section 60 gent and title if applicable. ND DIRECTORS [] (7.0505, Florid	: Registered Ar 13. 1.1 TITLE 1.2 NAME 1.3 STREET. 1.4 CITY-ST.	gent signs	ture require	ed when reinstating)	DATE	Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ag OFFICERS A D PREISS, SHELDON C 4101 CORAL TREE CIRCLE, # COCONUT CREEK FL 33073 D	gations of, section 60 gent and title if applicable. ND DIRECTORS [] ((NOTE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST- 2.1 TITLE	ADDRESS	ature require	ed when reinstating)	DATE	Change Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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.

SIGNATURE:

954-968-5959

U18259-90001-3 P98000093732

JuturePlanners 4101 Coral Tree Circle #218

1101 Coral Tree Circle #218 Coconut Creek, FL 33073 954-968-5959

September 10, 1999

To Whom It May Concern:

About three weeks ago, I received the Annual Report Packet. At that time, I was enjoying a well-deserved vacation in Alaska.

This was a '2nd Notice' form, stating that I owed \$550.00 for late filing. Please be aware that I never received the first notice because of an incorrect address noted on the packet.

I am enclosing a copy of the address page, and the notation to 'return to sender.' My correct address has been noted on the inside of the form.

I spoke with a representative of your organization, and she requested that I enclose the \$150 originally due. Enclosed is that amount.

If you have any questions regarding my application, please call me at 954-968-5959.

Thank you for your consideration.

Truly,

Sheldan Cheers Sheldon C. Preiss, President

FuturePlanners, Inc.