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 # 1. Corporation Name

(4)

PLAN B. INC.

SIGNATURE:

FILED May 14 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					
P.O. BOX 17703 WEST PALM BEACH FL 33416		P.O. BOX 17703 West Palm Beach FL 33416		DO NOT WRITE IN THIS	2DA∩E		
					3. Date Incorporated or Qualified 04/08/1991	Brack	
2. Principal P	lace of Business	2a. Mailing Address		,	4. FEI Number	T 7	Applied For
27 11386	2. Prosperity Fams Road	26 P.O. Box 32	44	6	65-0267580		Not Applicable
	2 8	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State	Beach Gardens, Fl	City & State 28 Palm Beach Gar	der	75, FL	6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	La Country		untry	1 A	8. This corporation owes or has paid the cur		
24 <u>55</u>	10 25 USA	29 334 3 0 30	-	USA		Yes	∐ No
	Name and Address of Current R NACENT TOCKNITT	legistered Agent	81	Name	10. Name and Address of New Registered	Agent	
BOOMENI, JOSEFII J. J				TVEFTC			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
PALM BCH GARDENS FL 33418			83				
			84	City	FL	85 Zi	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature typed or prested name of registered agent and talled applicabile (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND D				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	PST	DELETE 11T	1) TITLE			Change	Addition
NAME	BOGAERT, JOSEPH J. JR.	1.2 N	NAME	ļ			
STREET ADDRESS			STREET A	ADDRESS			18
CITY-ST-ZIP			UTY-ST	- ZIP			
TITLE	DC DELETE 21TI		IITLE			☐ Change	Addition C
NAME	***************************************		NAME				
STREET ADDRESS			STREET A	ADDRESS			
CITY-ST-ZIP			CITY-ST	T-ZIP			
TITLE	VP DELETE 3.1 10					Change	Addition
NAME	BOGAERT, MARYANN	32 N					1
STREET ADDRESS	7508 NEMEC DRIVE NORTH	i i		ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33406		CITY-ST	1 - ZIP		Change	Addition
TITLE		, _					Addition
NAME		l l	NAME				
STREET ADDRESS				ADDRESS			1
CITY-ST-ZIP TITLE		DELETE 51 TI	OTY-ST	- ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME		52 N				The custific	, C Madition
STREET ADDRESS				ADDOCCO .			
				ADDRESS			Į.
CITY-ST-ZIP TITLE		DELETE 6.1 TI	TITLE	- CIF		Change	Addition
NAME		6.2 N					
STREET ADDRESS				ADDRESS			1
CITY-\$T-ZIP			ITY-ST-				
	certify that the Information supplied with				Section 119.07(3)(i), Florida Statutes. I further ce	rtify that II	ne 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 outh; 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. 5/198 5/01-627-4779