## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

S58485

(1)

TM F	OF PI	ANTATION.	INC.

Principal Place of Business Maing Address			F INCHIDIN IDI BALDI ADIRI MINEL	BIN AIBH DIRIN BIBN BIBN BIBN BIBN BIBN BIBN		
7301 NORTHWEST 4TH ST SUITE 110 PLANTATION FL 33317 US		7301 NORTHWEST 4T SUITE 110				
		PLANTATION FL 3331 US		<ol> <li>Date Incorporated or Qualified 06/06/1991</li> </ol>	3a. Date of Last Report 04/07/1995	
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0264846	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zıp			Country	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30	Florida Statutes		
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	egistered Agent	
			81 Name			
HURST,			82 Street Add	ddress (P.O. Box Number is Not Acceptable)		
76301 NW 4TH STREET						
SUITE 1			83			
PLANTA	TION FL 33317		84 City		85 Zip Code	
	40 007.0-0	0 10034600 6: 11 01		ration submits this statement for the pur	FL 3 2000	
or registere familiar wit	ed agent, or both, in the State of Flor n, and accept the obligations of, Sec	ida. Such change was authori. tion 607.0505, Florida Stalute	zed by the corporation's boa	ard of directors. Thereby accept the appro	pointment as registered agent. I am	
OIGHT TOTAL	Signature, typed or promed native of registerest eyes		OTE: Registered Agent squature require		DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
TITLE	D DOCEMEN	DELETE	1 1 THLE		Change Addition	
NAME	MULLEN, JOSEPH P.		1.2 NAME			
STREET ADDRESS	20 SENECA RO		1.3 STREFT ADDRESS			
CITY-ST-ZIP TITLE	SEA RANCH LAKES FL V	☐ DELETE	1.4 CITY - ST - ZIP 2.5 TITLE		Change Addition	
NAME	HURST, SUSAN	Laborette	2 2 NAME		_ change _ manax	
STREET ADDRESS	5631 SW 8TH COURT		2.3 STHEET ADDRESS			
CITY - ST - ZIP	PLANTATION FL		2.4 City - \$1 - ZiP			
TIL€		☐ DELETE	3 1 DT_E		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3 4 CITY - SF - ZIP			
TITLE		☐ DELETE	4 † TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS	•		4.3 STREET ADDRESS			
CITY - ST - ZIP		Police	4 4 CHY - ST - ZIP			
TITLE		☐ DELETE	5 1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	6 1 TITLE		Change Addition	
TITLE NAME		[ ] been	6.2 NAM:		Change Addition	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZiP			6.4 CITY - ST - ZIP			
14. I do hereb	y certify that the information supplied	with this filing is voluntarily fur	mished and does not qualify	for the exemption stated in Section 119	.07(3)(k), Florida Statutes I further	
oath; that	the information indicated on this and I am an officer or director of the corp Block 12 or Block 13 if changed, or	oration or the receiver or trust	ee empowered to execute th	ate and that my signature shall have the iis report as required by Chapter 607, Fi	same legal effect as if made under orida Statutes, and that my name	

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954 48/2595

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