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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 04, 1999 8:00 am Secretary of State

05-04-1999 90164 005 \*\*\*158.75

## DOCUMENT # \$65550 1. Corporation Name PLANOPI D. INCORPORATED

<u>.</u>	U INCURPURATEU							
Principal Place	e of Business	Mailing Address				III <b>Bu</b> il Bhuil D	IBIL 4(BI) BIBIL 4	(Att BIB) (AA)
4931 VENDUS		4931 VENUS AVE						
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34652								
US US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 06/18/1991			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Ар	plied For
21		26			59-3085001			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	X	\$8.75 A Fee Re	
	e	City & State			. 6. Election Campaign Financing		\$5.00	May Be _
23	•	28			Trust Fund Contribution	<u> </u>	Added t	o Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the curr	ent year Int		[
24	25	29	30		Personal Property Tax.			<b>X</b> No
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New F	tegistered	Agent	
	IN, MARY ANNE			81 Name M	ARY A NNC MI	ANN (ble)	<del></del> -	
5124 LITHIA SPRINGS RD				493	31 VENUS AV	<u> </u>		
LITH	IA FL 33547			83			_	
				84 City NEW	Port Richey	FL	85 Zip C	Code (2
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Sta	tutes the al	ove-named corp	poration submits this statement for the	purpose of	changing its	registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	authorized Iorida Statu	by the corporation tes.	poration submits this statement for the on's board of directors. I hereby accept	the appoi	ntment as req	gistered
SIGNATURE	Mary and M	Jam, FRE	5,		4/29	199		
45	Shorture types or printed a major registered age	ntyrikd jung ringsplagethe." (NO ID DIRECTORS	TE: Registered	Agent signature require	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12
12.	PD OFFICERS AI	DELETE	1.1 711	1 F	ADDITIONAL PARTICION OF	I IOLINO 7 III	Change	Addition
	MANN, MARY ANNE	C 0222.4	1.2 NA					_
NAME	4931 VENUS AVE		1.210					I
STREET ADDRESS			4 2 CT					
CITY-ST-ZIP	NEW PORT DICHEY EL 34652			REET ADDRESS				
TELE	NEW PORT RICHEY FL 34652	∏ DELETE	1.4 CF	TY-ST-ZIP			☐ Change	Addition
TITLE	NEW PORT RICHEY FL 34652	☐ DELETE	1.4 CF 2.1 TIT	TY-ST-ZIP		<u></u>	☐ Change	☐ Addition
NAME	NEW PORT RICHEY FL 34652	DELETE	1.4 CF 2.1 TF 2.2 NA	Y-ST-ZIP LE ME		<u>.</u> .	☐ Change	Addition
NAME STREET ADDRESS	NEW PORT RICHEY FL 34652	☐ DELETE	1.4 CF 2.1 TH 2.2 NA 2.3 ST	Y-ST-ZIP  LE  ME  REET ADDRESS		-	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	NEW PORT RICHEY FL 34652		1.4 CF 2.1 TIT 2.2 NA 2.3 ST 2.4 CF	TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP			☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	NEW PORT RICHEY FL 34652	DELETE	1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TF	Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	NEW PORT RICHEY FL 34652		1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH 3.2 NA	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME		-		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NEW PORT RICHEY FL 34652		1.4 CT 2.1 TTI 2.2 NA 2.3 ST 2. 4 CI 3.1 TTI 3.2 NA 3.3 ST	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS		-		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	NEW PORT RICHEY FL 34652	□ DELETE	1.4 CT 2.1 TTI 2.2 NA 2.3 ST 2.4 CI 3.1 TTI 3.2 NA 3.3 ST 3.4, CI	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP		-		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	NEW PORT RICHEY FL 34652		1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH 3.2 NA 3.3 ST 3.4. CF	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE		-	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	NEW PORT RICHEY FL 34652	□ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4, CI 4.1 TII 4.2 NA	TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  AME	·	-	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NEW PORT RICHEY FL 34652	□ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TII 3.2 NA 3.3 ST 3.4. CF 4.1 TII 4.2 NA 4.3 ST	Y-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS		-	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NEW PORT RICHEY FL 34652	☐ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TII 3.2 NA 3.3 ST 3.4, CF 4.1 TII 4.2 NA 4.3 ST 4.4 CF	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  AME		-	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	NEW PORT RICHEY FL 34652	□ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TII 3.2 NA 3.3 ST 3.4. CF 4.1 TII 4.2 NA 4.3 ST	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  AME		-	☐ Change ☐ Change	Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	NEW PORT RICHEY FL 34652	☐ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TII 3.2 NA 3.3 ST 3.4. CF 4.1 TII 4.2 NA 4.3 ST 4.4 CF 5.1 TII 5.2 NA 5.3 ST	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP			☐ Change ☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	NEW PORT RICHEY FL 34652	☐ DELETE	1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA 3.3 ST 3.4. CF 4.1 TII 4.2 NA 4.3 ST 4.4 CF 5.1 TII 5.2 NA 5.3 ST 5.4 CF	Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  AME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE		-	Change Change	Addition Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: ₩