

2007- FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90415 029 ***150.00

DOCUMENT # P03000108243

1. Entity Name

PLANAS, WORTHY, GROUP, INC.



Principal Place of Business

1990 NE 163RD STREET
SUITE 205
NORTH MIAMI BEACH FL 33162

Mailing Address

1990 NE 163RD STREET
SUITE 205
NORTH MIAMI BEACH FL 33162



2. Principal Place of Business - No P.O. Box #

161 MADEIRA AVENUE

3. Mailing Address

161 MADEIRA AVENUE

Suite, Apt. #, etc.

10

Suite, Apt. #, etc.

10

1st MOORE

CR2E034 (10/06)

City & State

CORAL GABLES, FLA

City & State

CORAL GABLES, FLA.

4. FEI Number

57-1194009

Applied For

Not Applicable

Zip

33134

Country

MIAMI-DADE

Zip

33134

Country

MIAMI-DADE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PLANAS, ALBERTO E
1990 NE 163RD STREET
SUITE 205
MIAMI FL 33162

7. Name and Address of New Registered Agent

Name **ALBERTO E. PLANAS, SR.**
Street Address (P.O. Box Number is Not Acceptable)
161 MADEIRA AVENUE, SUITE 10
City **CORAL GABLES** FL Zip Code **33134**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alberto E. Planas

MAR. 30, 2007

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PLANAS, ALBERTO E SR. 1990 NE 163RD STREET, SUITE 205 MIAMI FL 33162	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PLANAS, ALBERTO E JR. 1990 NE 163RD STREET, SUITE 205 MIAMI FL 33162	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PLANAS, ALBERTO E. SR. 161 MADEIRA AVE. #10 CORAL GABLES, FL. 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PLANAS, ALBERTO E. JR. 161 MADEIRA AVE. #10 CORAL GABLES, FL. 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alberto E. Planas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR. 30, 2007 (305) 567-0291

Date

Daytime Phone #