

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

04-30-2007 90834 049 ***150.00

DOCUMENT # P95000000134					
1. Entity Name THE BABY PLANET, INC.					
Principal Place of Business 2406 N.W. 20TH STREET MIAMI, FL 33142 US			Mailing Address 2406 N.W. 20TH STREET MIAMI, FL 33142 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0545746	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SEVILLAL, MARIANO J 4210 NW 79TH AVE APT 2E MIAMI, FL 33166				7. Name and Address of New Registered Agent Name UGANDO & ASSOCIATES, INC. Street Address (P.O. Box Number is Not Acceptable) 2866 SW 176th TERRACE City MIRAMAR FL 33029-5557	
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 <i>Antonio A Ugando</i> Antonio A Ugando, Pres DATE 04/18/07					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEVILLA, MARIANO J 4210 NW 79TH AVE APT 2E MIAMI, FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2406 NW 20 St. Miami FL 33142	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SEVILLA, NAARA M 4210 NW 79TH AVE APT 2E MIAMI, FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2406 NW 20 St. Miami FL 33142	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SEVILLA, NAARA 4210 NW 79TH AVE APT 2E MIAMI, FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2406 NW 20 St. Miami FL 33142	☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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 Chapter 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 I am empowered.					
SIGNATURE: <i>Naara M Sevilla</i> Naara M. Sevilla, General Mgr			5-18-07 04/19/07 (305) 634-7811		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		